

**REACHING FOR A SHARED UNDERSTANDING:
EXPLORING THE VIEWS OF EDUCATIONAL PSYCHOLOGISTS AND
SPECIAL EDUCATIONAL NEEDS COORDINATORS ABOUT THE
ROLE OF THE EDUCATIONAL PSYCHOLOGIST IN SUPPORTING
MENTAL HEALTH AND PSYCHOLOGICAL WELLBEING IN
SCHOOLS**

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A research study submitted in partial fulfilment of the requirements of the University of East London for the Professional Doctorate in Educational and Child Psychology

APRIL 2017

ABSTRACT

This qualitative research, which adopted a pairing of social constructionism and participatory paradigms, posed the question of how Educational Psychologists and Special Educational Needs Co-ordinators view the role of the Educational Psychologist in supporting mental health and psychological wellbeing in schools. The views of four Educational Psychologists and three Special Educational Needs Co-ordinators were explored through semi-structured interviews. A thematic analysis of the interviews led to two thematic maps being created. Educational Psychologists wished to support the mental health and wellbeing of both children and young people and staff and viewed it as part of their role. However, they were aware of the barriers to engaging in this type of work, which could have wide-reaching implications for practice. The Educational Psychologists gave examples of mental health and wellbeing support that they had given to schools at an individual, group and whole school level. The Educational Psychologists identified a focus on emotional wellbeing that was threaded through all their duties, but acknowledged that this focus was not always recognised or understood by other professionals or service users. The Special Educational Needs Co-ordinators had not previously considered the Educational Psychology role to include mental health and wellbeing within schools but rather carrying out assessment. The Special Educational Needs Co-ordinators called for clarity around the Educational Psychology role and the activities that the Educational Psychology service can offer. The Special Educational Needs Co-ordinators expressed that they would value more support from Educational Psychologists to deliver therapeutic interventions and set up supervision for staff in schools. A working party comprising the principal researcher and the three Special Educational Needs Co-ordinators co-researchers explored the thematic maps and worked collaboratively to agree next steps, including ways in which the role of the Educational Psychologist in supporting mental health and wellbeing could be communicated more clearly with other professionals within the local authority where the research took place.

STUDENT DECLARATION

I declare that while registered as a research degree student at UEL, I have not been a registered or enrolled student for another award of this university or of any other academic or professional institution.

I declare that no material contained in this thesis has been used in any other submission for an academic award. This thesis is the result of my own work and investigation, except where otherwise stated. Other sources are acknowledged by explicit references in the text and a full reference list is appended.

I declare that my research required ethical approval from the University Research Ethics Committee (UREC) and confirmation of approval is embedded within the thesis.

Rachael Andrews

Signature: Date:

ACKNOWLEDGEMENTS

First and foremost I would like to thank all of the EPs and SENCOs who contributed to this research and without whom it would not have been possible. I very much enjoyed working with them all. I am grateful to all my colleagues in the local authority where this research was conducted for their interest and support, particularly my wonderfully calm and positive placement supervisor.

Thanks to Dr Tina Rae for nurturing my passion for mental health and wellbeing and for supporting me at the start of this journey. Special thanks to my Director of Studies, Dr Helena Bunn, for her incredible attention to detail, encouragement and faith in me.

My sincerest gratitude goes to all my family for their love and encouragement, particularly my husband Dave for embracing extra responsibilities and keeping family life fun for our children. I would like to give a special mention to my mum, Helen Terry, for instilling in me a passion for learning and ambition to achieve what might at first seem impossible. Thanks also to my mum for reading my entire thesis!

Last, and the polar opposite of least, I dedicate this thesis to my fantastic children, Lottie and Thomas, for making me laugh and giving me perspective when I needed it most. I hope that the sacrifices that have been imposed on them over the last three years will be outweighed by a faith that they can achieve whatever they want in life, given hard work, determination and the support of others.

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Abbreviations

ASD	Autism spectrum disorder
CAMH	Child and adolescent mental health
CAMHS	Child and adolescent mental health services
CBII	Child Behaviour Intervention Initiative
CBT	Cognitive Behaviour Therapy
CP	Clinical Psychologist
CPD	Continued professional development
CT	Cognitive Therapy
CYP	Children and young people
EHCP	Education Health Care Plan
ELSA	Emotional Literacy Support Assistant
EP	Educational Psychologist
ETHoS	E-thesis online service
HCPC	Health Care and Professions Council
INCO	Inclusion Co-ordinator
LA	Local Authority
MH	Mental Health
OCD	Obsessive compulsive disorder
PCP	Personal Construct Psychology
PTSD	Post-traumatic stress disorder
REBT	Rational Emotive Behaviour Therapy
SDQ	Strengths and Difficulties questionnaire
SEAL	Social emotional aspects of learning
SEMH	Social, emotional and mental health
SENCO	Special Educational Needs Coordinator
SEND	Special Educational Needs and Disability
SFBT	Solution Focused Brief Therapy

SWOT	Strengths, weakness, opportunities and threats
TA	Thematic analysis
TaMHS	Targeting Mental Health in Schools
TEP	Trainee Educational Psychologist
TME	Target monitoring and evaluation
VIG	Video Interactive Guidance

Chapter One: Introduction

1.1 Chapter overview

This introduction starts with a consideration of the different constructs of mental health (MH) and psychological wellbeing and explores the different terminology and associated meanings. Next is a discussion around the historical context in which the educational psychology profession sits and how the role of the educational psychologist (EP) is central to this research. An exploration of both the national and local agendas surrounding MH and psychological wellbeing in schools, relevant legislation, and guidance is considered. Finally, the researcher demonstrates the rationale for the research and reflects on their position within it.

1.2 Constructs of MH and psychological wellbeing

There are no agreed or universal definitions for MH or psychological wellbeing and it is acknowledged that the terms as well as the different understandings of these terms are constantly evolving. MH is often associated with MH difficulties, particularly within the medical professions, with a focus on assessment and treatment. In other fields, however, MH is constructed as something that everyone has whether it be good or bad MH. Miller (2016) described MH as an “ambiguous phrase” (p.1) and the way in which the term is constructed by different professionals is thought to be a barrier to multi-agency working (Weare, 2002). Fee (2011) suggested that the terminology relating to MH and psychological wellbeing is ever changing, with constructs which may have negative associations being prone to re-invention, particularly in education. Rogers and Pilgrim (2010) argued that the reality of MH and illness is not self-evident, but instead is a result of human activities such as labelling and stigmatisation. There is no widely accepted definition of the term ‘wellbeing’ and there has been much debate about whether wellbeing is concerned with hedonism, the actualisation of potential, or both (Ryan & Deci, 2001). The term ‘wellbeing’ is also used at an individual level, group level and societal level, which is why this research is concerned

with both MH and wellbeing. Durbin (2010) found that EPs tended to adopt a psychosocial view of MH and psychological wellbeing; they “were reticent in engaging unconditionally with work that emphasised the medical-diagnostic approach” (p.293). Roffey (2015) suggested that definitions of wellbeing are evolving to include issues of equality and community.

1.2.1 Definitions for the purpose of this research

The researcher has chosen to use the terms ‘mental health’ and ‘psychological wellbeing’ and these will be used throughout the thesis. It is recognised that there may be negative connotations linked to the term ‘mental health’ which in medical documentation is usually referred to as MH difficulties or disorders. For the purpose of this research, however, the description of MH proposed by Keyes (2002) is fitting; MH is a continuum with good MH at one end and mental illness at the other. MH is also the most frequently used term in current legislation and research; the SEND Code of Practice (2014) guides EP practice to consider and report on CYP’s emotional, social and MH development. The term wellbeing has been chosen, for the purpose of this research, to acknowledge the importance of the wellbeing of groups and communities as well as individuals. “Wellbeing is defined as a positive and sustainable condition that allows individuals, groups, organisations and nations to thrive and flourish” (Roffey, Nobel & Springer 2008 p.4). The specific term ‘psychological wellbeing’ was chosen as an attempt to hold firm to the application of psychology which is at the core of the researcher’s professional training.

1.3 Role of the EP; past, present and future

A review of the literature about how educational psychology has changed since the first school psychologist, Sir Cyril Burt (1883-1971) was appointed in 1913 shows a shift in the prevailing psychological theories and approaches and a consequential change in duties for the EP. The movement away from identifying or measuring deficits within CYP towards a more systemic model of enabling others to support them has been referred to as the reconstruction of educational psychology (Gillham, 1978).

Roffey argued that the traditional role of the EP in the field of CYP with special educational needs, and a role which encompasses a wellbeing agenda, do not necessarily have to be distinct or in conflict. A wellbeing focus “can be threaded through consultations, conversations and offers....sowing seeds where possible” (2015 p. 25).

There are many different stakeholders who have an interest in the role of the EP; CYPs, parents, teachers, SENCOs, head teachers, local authority SEN officers, child and educational psychology training providers, government policy makers, professional bodies and EPs themselves. Farrell, Woods, Lewis, Rooney, Squires and O'Connor (2006) carried out a review of the EP functions and contributions involving a variety of stakeholders. They recommended that EPs should continue to be involved in statutory assessment, however;

they should take advantage of the trend in the reduction of statutory work to expand and develop their activities in different areas where their skills and knowledge can be used to greater effect, e.g. in group and individual therapy, staff training and in systems work.

(Farrell *et al* 2006 p.11)

Ashton and Roberts (2006) suggested that the two stakeholders most concerned with EPs' work on a daily basis are SENCOs and EPs themselves. This, as well as for practical and ethical reasons, supports the choice of the researcher to explore the views of these two groups. Ashton and Roberts (2006) carried out a study to identify which aspects of the EP role are considered to be valuable and unique by SENCOs and EPs. Questionnaires were sent to all SENCOs and EPs within a borough in the North-West of England. Both EPs and SENCOs valued the relationship developed by the EP with their link school. Most of the SENCOs valued the traditional EP roles of individual assessment which may lead to statutory assessment, and the expert advice they gave to staff. However, many of the EPs thought that working through consultation with staff to help them find their own solutions was valuable to schools. Ashton and Roberts (2006) study revealed a considerable discrepancy between the EPs view of their own role and how school SENCOs viewed it. The different perceptions of the EP role and what makes it distinctive is highly relevant to this study.

1.4 Position of the researcher

Transparency regarding the views and position of the principal researcher is important, particularly given the relativist ontology of the study and the transactional epistemology adopted which acknowledges that the researcher cannot be separated from that which is being researched. The researcher has a particular interest in MH and psychological wellbeing. Given the doctoral training with focus on therapeutic interventions, solution focused consultation and eco-systemic practice, the principal researcher believes that EPs are well placed to support MH and wellbeing in school at a universal, group and individual level. The principal researcher has four years teaching experience in addition to ten years experience of working in education in other roles. Through these experiences, the need for schools to make the MH and wellbeing of their pupils and staff as important as academic outcomes has become apparent to the researcher. In order for schools to provide CYP with essential life skills, psychological wellbeing must be monitored and nurtured. It is the researcher's belief that the EP role can support schools to address MH without stigma and make it everyone's business.

1.5 National Context

In January 2017 the Prime Minister outlined the Government's vision for a civil society. The proposal included a consideration of the MH of CYP:

What I am announcing are the first steps in our plan to transform the way we deal with mental health problems at every stage of a person's life: not in our hospitals, but in our classrooms, at work and in our communities.

This starts with ensuring that children and teenagers get the help and support they need and deserve, because we know that mental illness too often starts in childhood and that when left untreated, it can blight lives, and become entrenched.

But treatment is only part of the answer. We must look at what more can be done to prevent mental health problems, and work with you to capitalise on the crucial role civil society has to play in helping young people.

(The UK Government, Prime Minister's Office, 2017)

Whilst these proposals were welcomed by bodies representing the EP profession, there was sense of disappointment that EPs were not mentioned during this speech. The President of the BPS gave the following response:

Educational psychologists are best placed to assist the government in delivering its aspirations in this regard. But over recent years, many educational psychology services have been significantly eroded to the detriment of effective support for children and young people, their parents and families and others responsible for their wellbeing.

(British Psychological Society, 2017)

The SEND Code of Practice (2014) refers to the broad areas of need, including social, emotional and MH difficulties. This is a change from the previous Code of Practice (2001) which refers to behaviour, social and emotional development. This change recognises that challenging, disruptive or disturbing behaviour “may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained” (p.98).

The Young Minds website (accessed 16.4.15) states that one in ten CYP aged between five and 16 years suffer from a diagnosable MH disorder; this represents around three children in every class. More than half of all adults with MH problems were diagnosed in childhood. These statistics have huge implications for all professionals working with CYP. In the last decade several initiatives have focused on the MH of the UK population as a whole and of CYP in particular. In 2005 the Social and Emotional Aspects of Learning (SEAL; Department for Education and Skills, 2005) curriculum was introduced to schools. In 2008 the Improving Access to Psychological Therapies (IAPT; Department of Health, 2008) programme was launched and in the same year the Targeting Mental Health in Schools (TaMHS) project was commissioned by the Department for Children, Schools and Families. In 2011 a cross-government MH strategy ‘No Health without Mental Health’ was published and a children and young people’s IAPT programme was initiated with the aim of improving existing Child and Adolescent Mental Health Services (CAMHS) in the community.

NHS England (2015) published Future in Mind; Promoting, protecting and improving our children and young people’s mental health and wellbeing. This government report outlined findings from the Children and Young People’s Mental Health and Wellbeing Taskforce which was established in September 2014 to consider ways to make it

easier for CYP and carers to access help and support when needed. The report includes proposals highly relevant to EPs: improving public understanding of MH and tackling stigma and discrimination; ensuring timely access to MH support is available; joining up services locally through commissioning; increased use of evidence-based interventions; improving access for parents to evidence-based programmes of intervention and support to strengthen attachment between parent and children. One of the aspirations outlined in the report was that “professionals who work with children and young people should be trained in child development and mental health, and understand what can be done to provide help and support for those who need it” (p.18). It could be argued the EPs fit this description as the three year doctoral training includes all these elements. However, educational psychology was only mentioned once in this lengthy report. The juxtaposition of EPs’ search for a distinctive contribution (Farrell *et al*, 2006) and a recognised shortfall in MH support for CYP contributes to the rationale for this research. Future in Mind (2015) also suggested that the current tiered model of child and adolescent MH support was no longer fit for purpose, and called for this to be replaced by the Thrive Model. This recommendation has influenced the proposed transformation of local service as described below.

1.6 Local Context

This research took place in a large EP service within a local authority in the South East of England. The service, as with most EP services across England, is currently understaffed and this impacts on the level of service delivery. The service has recently adopted a consultation model of service delivery. This change has moved the emphasis away from assessing children which adopts a within-child model, towards working with the adults around a child; thinking systemically about how positive change is most likely to occur. Wagner (2000) referred to a consultation as being a “collaborative and recursive process that combines joint problem exploration, assessment, intervention and review” (p. 11). By adopting a consultation model, the EPs can work collaboratively with teachers who may be experiencing stress around supporting a particular child or group of children. It can be argued that this contributes to the wellbeing of teachers as well as the children and young people in schools.

2015 was the Year of MH, launched by the LA's Health and Wellbeing Board to encourage people to think about the importance of this issue and how to tackle MH stigma on a daily basis both at work and at home. According to the local Strategy for Health Young Minds (2014) the EP service currently sits within tier 2, primary CAMHS, which is concerned with "short term psychological or counselling interventions delivered by a trained mental health professional for children and young people presenting with mild emotional or mental health issues" (p.5). However, following recommendations from the Future in Mind report (2015), the local CAMH services are currently undergoing transformation. In the LA where this research took place, a document summarising the next steps in the CAMHS review includes a recommendation from the CAMHS commissioners to adopt a new approach with a bigger focus on prevention and early intervention, and the use of a six-level Thrive model. The CAMHS commissioners also plan to establish a CAMHS Transformation Board which will consult with stakeholders as widely as possible about issues, priorities and needs. The researcher plans to share the proposed research study with the CAMHS commissioners to bring the role of the EP to their attention and open lines of communication for multi-agency working.

1.7 Rationale and aim of the research

The overarching aim of the research was to help bring MH and psychological wellbeing to the forefront of EP practice in the LA where the research took place and inform areas for consideration in the training and continued professional development of EPs.

The purpose of this research was twofold. Firstly, the research aimed to explore the views of EPs and SENCOs in order to develop a better understanding of the EP role in supporting MH and wellbeing in schools. Secondly, as the SENCO participants become co-researchers, the research aimed to empower them to apply this greater shared understanding to produce practical outcomes for future EP practice.

Reason and Bradbury (2001) stated that, "action without theory is blind, just as theory without action is meaningless" (p.2).

1.7 Chapter summary

Chapter one introduces the terminology used throughout the thesis and discusses the changing nature of the EP role given the prevailing paradigms over time. The national and local scenes for the research are set and the rationale and aims outlined. Chapter two provides a critical review of other research and literature available relevant to the EP role in support MH and wellbeing in schools.

Chapter Two: Literature Review

2.1 Chapter Overview

With chapter one introducing the national and local contexts for the research and outlining the rationale and aims, chapter two gives a detailed account and analysis of the relevant research and literature that explores the role of the EP in supporting MH and wellbeing in schools. This lays the foundations for the research methodology outlined in chapter three.

2.2 Scope of the Literature Review

In April 2015, a literature review of how EPs use CBT to improve wellbeing in schools was carried out for an assignment in partial fulfilment of the doctoral training. This provided a base of relevant literature from which to start this research. A further review of the literature around MH and wellbeing in schools, with particular regard to the role of EPs, was carried out between October 2015, when the proposal for this research was written, and October 2016. Relevant university seminars and CPD sessions on placement supported the gathering of books, journal articles and legislation and guidance documents. 'Snowballing' of their reference lists was used to identify further relevant studies. The e-theses online service (EThoS) was searched in October 2015 and two relevant theses were found, Fee (2011) and Durbin (2010). Previous TEPs at UEL were asked, following presentations in July 2016, for their theses before they became available on EThoS; Miller (2016) and Wood (2016). Once preliminary reading of the area had been undertaken, a systematic literature search was carried out.

2.3 Systematic literature search

In October 2016, a systematic literature search was carried out to review the available research about the role of EPs in promoting MH and wellbeing in schools. As there was a wealth of information and a growing evidence base around MH and wellbeing

promotion in schools generally, the researcher wanted to limit the literature search to studies or discussion papers with particular relevance to the role of the EP in supporting this agenda. A trail of the systematic literature search can be found in appendix A. EBSCO was used to search the following databases:

- British Education Index
- Child Development and Adolescent Studies
- CINAHL Plus
- Educational Research Complete
- ERIC
- Psych INFO
- Teacher Reference Centre

2.3.1 Inclusion Criteria

As discussed in chapter one, not only are there many different constructs relating to MH and psychological wellbeing, but the language and terminology around MH and wellbeing is also wide ranging. This was taken into consideration when the search terms were chosen; education* psycholog* AND (mental health OR wellbeing OR well-being OR well being OR emotional literacy OR resilience) AND school*. When all search terms were given equal weighting by identifying articles with these in the subject terms, 389 articles were identified. However, the majority did not mention EPs or EP practice; the terms 'education' and 'psychology' were mentioned separately. This led to a tightening of the primary search term ("education* psychology*" – inverted commas ensured that the words were found together in the subject terms) and to search for articles with this term in the title. In order to find more relevant studies and articles, the search was then opened out into two further areas: EP role in supporting wellbeing for children and young people; EP role in supporting wellbeing for school staff. Therefore, three Boolean search phrases were used:

EP role in supporting wellbeing in schools	EP role in supporting wellbeing of children and young people.	EP role in supporting wellbeing of school staff.
“education* psycholog* (SU) AND wellbeing OR well-being OR “well being” OR “emotional literacy” OR “resilience” (SU) AND school*	“education* psycholog*” (TI) AND wellbeing OR well-being OR “well being” OR “emotional literacy” OR “resilience” (SU) AND Children OR “young people” OR student* OR pupil* (SU)	“education* psycholog* (TI) AND wellbeing OR well-being OR “well being” OR “emotional literacy” OR “resilience” (SU) AND Teacher* OR “support assistant” OR school staff (SU)

Table 1: Literature search terms

2.3.2 Exclusion Criteria

By skimming the articles and reading the abstracts it could be seen that many of the articles reported research conducted outside the UK. As this research is concerned with the delivery of EP services and wellbeing in schools in the UK, studies conducted outside the UK were excluded. The initial searches also yielded some articles from as far back as 1963, although not many. The search dates were adjusted to exclude articles published before 2006 this being the year of the Farrell report which reviewed the functions of EPs and recommended a widening of the activities carried out by EPs. Also excluded from the literature search were reviews and articles which were not published in peer review journals. Due to the ontological position within which this research sits, articles which proposed frameworks or discussed relevant and up-to-date implications for educational psychology practice were included in addition to research studies.

2.4 Critiquing the relevant literature

Following the systematic literature review, the most relevant papers and research studies were read and their strengths and limitations reflected upon. A table

summarising the most relevant articles, their theoretical orientations, an outline of each study/discussion, a summary of the findings and a consideration of strengths and limitations can be found in appendix B. The articles were sorted into themes for ease of reference and discussion. It should be noted that these themes were chosen by the principal researcher and some of the articles could fit into more than one of the themes.

Themes and subthemes of systematic literature search		No. of articles
EPs' use of wellbeing or therapeutic interventions	In general	5
	With children and young people	3
	With school staff	3
	With parents	1
EPs' involvement in whole school approaches to wellbeing	Carrying out training/building capacity	1
	Contributing to whole school approach	4
EPs' role in MH and wellbeing	Perceptions of...	3
	Working in multi-agency groups	2
Total		23

Table 2: Themes and subthemes of systematic literature search

2.4.1 EPs' use of therapeutic interventions

In a review of educational psychology, Farrell *et al* (2006) recommended the need to return to therapeutic functions. MacKay (2007) posed the question “is therapy for mental health issues an ‘educational’ concern?” (p.11) and discussed the fall and rise of therapy in educational psychology. He postulated four reasons for the fall in the use of therapy; the reconstruction of educational psychology, increasingly demarcated professional boundaries, the focus on education and the impact of legislation. These reasons are inextricably linked to the history and development of the educational psychology profession as outlined in the introduction. MacKay (2007) suggested there had been an atrophy of therapeutic skills as a result of increase statutory assessment and report writing. Several reasons for the proposed recent rise in the use of therapy were outlined; a historically inevitable process, the rise in MH problems in childhood, the establishment of an evidence base for psychological therapies and a re-examination of roles and boundaries in applied psychology. MacKay (2007) concluded

that EPs have a key opportunity to make a significant contribution to the area of MH and should include therapy in the range of services they routinely offer.

Atkinson, Squires, Bragg, Muscutt and Wasilewski (2014) examined the evolving role of the EP in providing therapeutic support through the use of a UK wide survey which could be completed either online or paper copies which were sent to all educational psychology services. Atkinson *et al* (2014) found that 92% of the 455 EPs surveyed used therapeutic interventions as part of their practice. Solution Focused Brief Therapy (SFBT; De Shazer *et al*, 2007), Cognitive Behavioural Therapy (CBT; Beck, 1967 and Ellis, 1957) and Personal Construct Psychology (PCP; Kelly, 1955) were the most reportedly used therapeutic interventions. This survey raises the question of what constitutes therapy or therapeutic interventions. 68.7% of respondents reported using therapeutic interventions as part of the assessment process, 66% of respondents said that they used therapeutic interventions as part of consultation and 54.5% said that they used therapeutic interventions as part of systemic work such as training. Whilst it can be argued that approaches such as solution oriented conversations, consultation, PCP, motivational interviewing and elements of CBT are interweaved through all EP practice, does the profession need to distinguish between the use of therapeutic approaches and delivery of therapy per se? It can be argued that this question runs parallel to the attempted shift of educational psychology practice away from measuring and treating deficits towards working with systems. This tension was mentioned in several of the studies and articles below.

2.4.1.1 EPs' use of therapeutic interventions to support the wellbeing of CYP

Atkinson, Corban and Templeton (2011) reported two small scale qualitative studies exploring EPs' use of interventions to support the wellbeing of CYP. The studies were guided by the following research questions; how are EPs using therapeutic interventions and what are the issues for EPs in delivering therapeutic interventions?

The first study consisted of focus groups and semi-structured interviews with EPs, TEPs and Clinical Psychologists (CP) to discuss the use of therapeutic interventions with CYP. The composition and size of the focus group are possible limitations of this study. Twelve professionals including two assistant EPs, six EPs and four CPs took

part in the one-hour focus group. It could be argued that it would have been difficult for all participants to have been able to express their views. There would also have been several possible power imbalances in the focus group. The researcher was a TEP and arguably less experienced than the majority of participants. Experienced EPs would have been more likely to express their views and opinions than assistant EPs. Another power imbalance could have arisen as a consequence of the higher number of EPs than CPs in the focus group. The focus groups and interviews were transcribed and the data organised into themes. The second study used a questionnaire prompting qualitative responses through open-ended questions, followed by semi-structured interviews with EPs only. Thematic analysis (Braun & Clarke 2006) was used with transcribed data taken from digital audios of the interviews and written responses from the questionnaires. Themes in relation to the research questions were drawn together into superordinate themes encompassing the findings of both studies.

Atkinson *et al* (2011) used a SWOT analysis to explore the themes and superordinate themes from both studies. Strengths identified were: EPs use a wide range of therapeutic interventions in a flexible way and at different levels; they have access to CPD and supervision; wide definition of 'therapeutic intervention' in EP practice. The themes and subordinate themes identified as weaknesses were: lack of therapeutic interventions with young children; schools not always aware that EPs offer therapeutic interventions; limited opportunities to use. A possible great future significance of therapeutic work, a new directions for EPs and multi-agency working were all identified as opportunities. Threats proposed were anxiety over role definitions, work related to SEN procedures taking precedence and time limitations.

Greig (2007) reviewed the evidence base for using CBT with CYP. She found good evidence for the efficacy of using CBT with CYP experiencing depression (Harrington, Whittaker, Shoebridge & Campbell 1998) or anxiety (Kendall 1994). The evidence base for the use of CBT for supporting children with a greater range of difficulties such as OCD, school refusal and PTSD is less robust but growing. Greig (2007) also reviewed the evidence base for using CBT approaches at an early intervention or universal level. She reported that a "universal programme may not necessarily deliver the right level of support to those most in need of it" (p.24) and suggested that caution must be taken around the characteristics of targeted populations. Using elements of Ronen's (1997) model of CBT for children and young people, Greig (2007) developed

a framework for EPs to deliver CBT to CYP in school, based around ongoing parallel assessment, intervention and evaluation. Greig (2007) concluded that EPs “and their services need to audit their current ethos on the provision of an effective psychotherapeutic service and to determine current levels and types of demands for such a service” (p.31).

Rait, Monsen and Squires (2010) carried out a review of CBT approaches used by EPs with CYP. Two different types of CBT interventions were reviewed, Ellis’s Rational-Emotive Behaviour Therapy (REBT), and Beck’s Cognitive Therapy (CT). Meta-analysis of both REBT and CT indicated good effect sizes for all age groups 5-18. Interestingly, the biggest effect was size seen in the youngest age range. This study also discussed barriers to EPs delivering CBT, other professionals able to deliver more cost effective therapy and EPs having time constraints and limited resources. Rait *et al* (2010) suggested that EPs are well placed to support school staff in delivering CBT and influencing whole-school approaches such as SEAL.

Another type of intervention which EPs have been involved with is Nurture Groups, introduced by Boxall (2002). Nurture Groups are underpinned by attachment theory and aim to provide CYP with reparative attachment experiences in school. Hughes and Schlösser (2014) carried out a review of the evidence-base for the effectiveness of Nurture Groups. The researchers, therefore, took a positivist stance by including only quantitative studies in their systematic review. Although they were unable to carry out a meta-analysis due to the differing methodologies across the papers reviewed, all of the 13 studies included used the Boxall Profile as a pre and post measure. Six studies evaluated classic Nurture Group models, four studies evaluated a part time Nurture Group model and one study evaluated a mix of classic and part time. The other two papers included were case studies. The systematic review found that evidence for the effectiveness of Nurture Groups used with primary aged children is good (improvement found in all Boxall Profile strands). The evidence for secondary aged children was not as robust but still demonstrated improvement in some of the Boxall Profile Strands.

2.4.1.2 EPs' use of interventions to support the wellbeing of school staff

Teacher wellbeing is critical to both student wellbeing and learning outcomes (Lovewell, 2012). NASUWT (2010) carried out a study exploring the experiences of teaching with work-related stress and MH problems which found that the majority of respondents stated that they have not achieved a reasonable work/life balance. They suggested that “truly ‘whole-school’ approaches to well-being in schools must include a consideration of teachers’ health and psychological needs” (p43). The study also found that teachers valued having access to someone prepared to listen to their concerns and offer guidance that is specific to them (NASUWT 2010, p.31). With this in mind, EPs can provide a valuable service to school staff through consultation and supervision. The following three studies outline examples of EPs providing supervision to school staff.

Sharrocks (2014) explored school staff perceptions of wellbeing and their experiences of taking part in a wellbeing group intervention. The research took a systemic and organisational approach, considering the importance of school ethos to promote wellbeing and reduce stigma around talking about MH. The wellbeing intervention Chill and Chat, facilitated by an EP, was attended by between twelve and sixteen school staff members in one primary school. Focus groups and questionnaires were used to gather qualitative data. While Sharrocks (2014) found that staff who had attended the wellbeing intervention felt they were better able to deal with incidents related to children’s emotions in the classroom, she also reported a great deal of discussion about the lack of acceptance of talking about wellbeing at school. A very valid and interesting discussion point was raised in this study; the importance of not letting ‘good MH’ become another standard for teachers to meet.

Wood (2016) explored the mechanisms of Solutions Circles when used to support school staff. Solution Circles were introduced by Forest and Pearpoint (1996) as solution oriented and structured group supervision sessions, offering a creative problem solving tool to support inclusion. Wood (2016) introduced Solution Circles in three different schools and trained staff volunteers as facilitators. A total of thirty-one volunteers participated in the Solution Circles. Wood (2016) took a critical realistic perspective employing both quantitative and qualitative methods. Pre and post self-report questionnaires were used to measure resilience, anxiety and self-efficacy.

However, the greater weight was given by the researcher to the quantitative data collated from verbal feedback gathered in circle five in each school, as well as semi-structured interviews with thirteen staff volunteer facilitators. Wood (2016) found no statistical difference between the pre and post self-efficacy, resilience and anxiety measures, which was likely due to the small sample size; although thirty-one teachers took part the sample was reduced to sixteen due to attrition. There was a small effect size for self-efficacy indicating an improvement for the majority of participants after the Solution Circles. Themes emerging from the thematic analysis of verbal feedback at the fifth circle and the semi-structured interviews were as follows: the importance of structure; a need to talk; feeling like a team; “what are you lot doing down there?” indicating somewhat negatives views of other staff; the importance of individual characteristics; the function of support; dealing with what’s in the field or the school context. Wood (2016) used these themes to discuss the mechanisms of Solution Circles and their value according to three areas; support, people and school context.

A small pilot study, as described by Burton (2008) prompted the introduction of a new role in many schools; Emotional Literacy Support Assistants (ELSA). The ELSAs role is to support CYP to develop their understanding of emotions and recognise and respect the feelings of others. ELSAs receive training from EPs in order to run programmes in schools to help pupils learn new coping skills to improve their wellbeing. Osborne and Burton (2014) evaluated group supervision sessions provided for ELSAs by EPs. Questionnaires were completed by 270 ELSAs to gain their views and both quantitative and qualitative data were collated. The study yielded a 43% response rate which, although considered high for a study of this type, is still less than half of the ELSAs who received supervision. It could be argued that the ELSAs who completed the questionnaire may have done so because they felt that the supervision either fully met their needs or did not, rather than ELSAs whose opinions were more mixed or less certain, thus skewing the results.

Osborne and Burton (2014) found that supervision sessions were perceived by the ELSAs as helpful, mean rating of 4.38 on a scale of one to five. The majority of ELSAs, between 93% and 95%, felt that the group size, length and frequency of supervision was appropriate. Seven percent of ELSAs said that the supervision did not meet their needs. Further questions identified that some wanted individual support, some wanted more group discussion time and some wanted more experienced ELSAs in their group.

By carrying out a thematic analysis of the qualitative data gathered, Osborne & Burton (2014) identified a theme around the support function supervision provided for the group; reducing feelings of isolation, creating a sense of unity and providing a chance to offload. It could be argued that this supervision enhanced the wellbeing of the ELSAs. Whilst this study provided valuable feedback about group supervision and an evaluation of EP impact, it can be criticised for not being explicit in the article about the ontological position of the researchers. Although it can be assumed that social learning theory may have influenced the introduction of group supervision for ELSAs, the theoretical underpinning was not discussed either.

2.4.1.3 EPs' use of therapeutic interventions with parents

McQueen and Hobbs (2014) used narrative therapy when working with parents. Their intervention was not specifically aimed at improving parental wellbeing, but rather promoting genuine partnership through the use of a specific therapeutic tool. McQueen and Hobbs were interested in the power differentials when EPs work with parents. Therefore, the rationale for the research considered ways in which EPs could work with parents in a more collaborative way; moving away from the idea of the EP being an expert giving advice towards genuine and respectful collaboration. Parents were invited to work with the researchers, who were EPs, to talk about a concern they had relating to their child/children. Following a preparatory session at the school to introduce narrative therapy, the volunteer parents had six one-hour sessions with the EPs in a building which was separate from the main part of the school. Film clips and audio selected from the sessions were used with TEPs, with the consent of the parents. This 'outsider witness practice' was used to thicken the stories and the parents fed back that this practice was positive for their self-esteem. This qualitative study was firmly set in the social constructionist paradigm and used activity theory (an approach to research stemming from Marxist philosophy which attempts to explore human activity by understanding the interaction between the individual and society) to illustrate the process of using narrative therapy with parents. Only three parents volunteered to take part in the intervention, two parents being a couple in the same family. Unfortunately, the other parent did not want the content of their conversations in sessions to be used for research purposes. This research was therefore a very small

case study of one couple. However, it provided a powerful, personal and positive narrative about a couples' perceptions of parenthood. It also provided an example of how EPs may be able to achieve genuine partnerships with parents through the use of therapeutic tools.

Usefulness of evidence-base of therapeutic interventions

With this research being influenced by social constructionism, it is appropriate to be critical of the evidence-base of interventions to inform practice for several reasons. First, research to determine whether an intervention is effective is underpinned by the scientific premise that variables can be manipulated or kept static in order to test whether one effects another. In the real world of complex human behaviour, it is not possible to control for all the variables in this way.

The gold standard of efficacy research has long been considered to be randomised control trials (RCT) whereby participants are randomly assigned to the treatment condition/s and a control condition. This type of research often assumes only a quantitative methodology to measure the effectiveness of an intervention and does not give a rich picture of the changes that have occurred and why. Pugh (2010) concurs with this second criticism of efficacy research; sometimes the simple question of whether or not an intervention works can mask other important questions like how or why positive change has occurred, or not. The American Psychological Association (APA, 2017) now recognises the importance of supplementing quantitative data with qualitative methodologies such as case-studies, epidemiological studies and interviews, particularly for cross cultural research. These methodologies help to answer the why and how questions.

The third consideration of evidence-based practice is how the dominant discourse of which interventions are thought to be effective can create a self-fulfilling cycle. Once a particular intervention is considered to be effective, it is used more often in practice and therefore the evidence-base becomes wider. This may led to professionals narrowing their use of different interventions or treatment methods. Ronen (1997) found that therapists tend to use the therapy they know and feel confident in delivering.

Finally it is important to consider the concept of intervention fidelity; the requirement for the administrator to adhere to the protocols of the intervention as intended. Efficacy research often relies on standardisation of intervention implementation in order for improvements to be attributed to the intervention and can be replicated. This undervalues the principal of tailoring interventions to the needs of the individual. Wampold (2001) suggests that there exists insufficient evidence that successful interventions are dependent upon standard and replicable delivery. Perepletchikova, Treat and Kazdin (2007) found that low integrity intervention could be very effective. There are also issues around copyrighting manualised programmes where professional practice and business merge. When recommending approaches or interventions EPs and TEPs should consider the ethical issues of these programmes in relation to the publishers and authors vested financial interests. Pugh (2010) called for better quality assurance to support a fuller understanding of ways in which standard manual interventions might be moderated by local factors, such as ethnicity or culture, and mediated by core process variables such as therapeutic relationship and client motivation.

2.4.2 EPs' involvement in whole school approaches to wellbeing

2.4.2.1 Training and capacity building by EPs

Boorn, Hopkins, Dunn and Page (2010) evaluated a training programme delivered by EPs which aimed to promote an optimal environment for learning and emotional wellbeing. The training programme, growing a nurturing classroom, was underpinned by attachment theory and took into consideration the psychosocial development of CYP. Professionals from 73 primary schools attended the training over one or two days and were required to complete an evaluation questionnaire. All of the seven main sections of the evaluation questionnaire received feedback from 4 to 4.5 (on a scale of 0-5 with 0 being 'not at all' and 5 being 'completely') when averaged from all training courses, indicating that delegates found the training useful and met their needs. This

research highlighted the importance of a whole-school ethos and how EPs can have an impact at this level. Limitations of the study were that some delegates received one day training while others received two days, and rating scales used to measure effectiveness and impact were subjective and open to interpretation. Although some qualitative feedback was reported in the paper, the answers to open-ended questions on the questionnaire were not thematically analysed.

2.4.2.2 EPs contributing to a whole-school approach to wellbeing

The Future in Mind report (2015) stated that “universal services support children and young people’s wellbeing through delivering mental health promotion and prevention activities, which work best when they operate on a whole system basis” (p.35). Promoting social and emotional learning in schools was important to the EPs involved in developing the SEAL materials (Department for Education, 2005). Roffey (2015) suggested that EPs may already have been having a positive impact on systemic change without conscious recognition. “This is not only about what they do, but how they do it. Even with limited resources, especially time, it is possible to enhance universal well-being” (Roffey, 2015 p.26).

Wyn, Cahill, Holdsworth, Rowling and Carson (2000) suggested that rather than assigning most resources to a few students with behavioural, emotional or learning difficulties, it would be more effective for every teacher to be trained and skilled as a teacher for wellbeing. This would also help to prevent CYP who are anxious or depressed but do not present with challenging behaviour from flying under the radar.

Hall (2010) reported on a commissioned research project aimed at listening to and acting on pupils’ views about the social and emotional aspects of learning in their school. EPs conducted focus groups with children aged 5-11 to gain their views. The focus groups explored features of their school that promoted or demoted MH and wellbeing using the Ten Element Map (MacDonald & O’Hara 1998). The themes that emerged from the focus groups were around the quality of the environment, self-esteem, emotional processing, self-management skills and social participation. The findings had implications for the whole school and researchers promoted the concept of pupils becoming co-researchers in future projects in the school.

2.4.3 EPs' role in supporting MH and wellbeing

2.4.3.1 *Perception of EPs' role in supporting MH and wellbeing*

Fee (2011) explored EPs views of their role in working with child and adolescent MH and psychological wellbeing. Fee (2011) adopted a critical realist paradigm, using both quantitative and qualitative methods to explore the views of EPs. Questionnaires were sent to EPs in three different LAs and then six in-depth interviews were conducted. Of the 72 EPs who completed the questionnaire, 83% felt they engaged in MH interventions and 58% reported that MH work was conducted with other professionals. For the qualitative stage of the research, Fee (2011) employed Grounded Theory when carrying out the interviews. Core concepts that emerged in relation to EPs thoughts about their involvement in MH and wellbeing work were; the links between MH and learning, service boundaries, EP practice, needs and expectations of the customer and continuum of practice. Core concepts that emerged in relation to issues preventing EPs carrying out MH work were reflective of the barriers identified by Atkinson *et al* (2011), mentioned above. Fee (2011) also identified that political, organisational and service factors can prevent EPs from engaging in MH and wellbeing work. The research suggested a need for a shared vision of the EP role in relation to MH and wellbeing.

Miller (2016) explored CPs and EPs constructs of MH in the context of secondary aged children. A critical realist epistemology was adopted and qualitative methodology utilised. The constructs of six EPs and six CPs around MH in secondary school aged children were explored through semi-structured interviews. Digital audio recordings of the interviews were transcribed and thematic analysis was employed with two thematic maps emerging. Miller (2016) found that EPs and CPs constructed MH differently. EPs generally adopted a systemic approach and lacked experience or training in specific MH needs. CPs applied their knowledge and experience to creating scripts around specific MH needs. Interestingly Miller (2016) found that both EPs and CPs reported adopting a social constructionist approach to MH. The research also found professional defensiveness between EPs and CPs and misunderstandings about each other's roles in relation to MH. The notion of MH constructs is thoroughly explored in this research and the differing constructs created by different professionals is

acknowledged as an important area to build upon. Miller's research was specifically around the MH and wellbeing of secondary aged CYP and did not address MH and wellbeing in schools more generally. Miller (2016) suggested that "future research could include a participant group of school staff, exploring their needs and expectations in working with practitioner psychologists, and understanding MH" (p.121).

Rothia, Leavey and Best (2008) examined teachers' views about the involvement of EPs with pupils with possible MH difficulties. They carried out interviews with 30 teachers with a range of experiences. Rothia *et al* (2008) used IPA to identify four themes related to the teachers' views: EP service-related issues; relationships with EPs; issues related to the impact on pupils of the involvement of EPs; the role and function of EPs as perceived by teacher. EPs were perceived by teachers to be an essential part of the support system for pupils with MH needs. "EP's skills were particularly valued in facilitating disclosure from the children, as well as for their role in encouraging parental participation" (p.134). There were frustrations, however, around EP shortages and lack of time allocated to each school; interviewees indicated that observation and assessment took up most of their allocated EP time. The study also revealed that some teachers felt overburdened by the responsibility of implementing the EPs' recommendations.

Rothia *et al* (2008) reported that when it came to possible MH difficulties teachers believed that EPs were no substitute for contact with a MH professional. Whilst it is recognised and acknowledged that there are other professionals who may be more experienced in supporting CYP with persistent, severe and complex MH disorders, EPs are well placed to influence universal programmes of MH and wellbeing in schools, build capacity through training and consultation and implement and measure effectiveness of appropriate interventions for groups or individuals. The paper by Rothia *et al* (2008) concluded with a call for a bridging of the service boundaries to ensure effective joint working.

2.4.3.2. EPs' role in multi-agency working to support MH and wellbeing

The HCPC requires psychologists “to contribute effectively to work undertaken as part of a multi-disciplinary team” (2015, p. 9). The SEND Code of Practice (2014) explains how establishing effective partnerships across education health and care will lead to improved outcomes for 0-25 year olds with SEN or disabilities.

Durbin (2010) used activity theory to examine a multidisciplinary child behaviour team of EPs, family support workers and primary MH workers working within a culturally diverse urban community. Durbin (2010) found that EP work in the multi-disciplinary child behaviour team was constrained by different understandings and expectations of the EP role. Another tension recognised by Durbin (2010) in multidisciplinary teams was the issues about different professionals' beliefs about working directly with CYP or working primarily in a consultation capacity. Strengths identified by Durbin of the EPs within the multidisciplinary team were their knowledge and skills around group working and application of theoretical knowledge. The Future in Mind report (2015) proposed that systems should be built around the needs of CYP and their families rather than a system organised around services that the different organisations provide. It was recommended that this transformation should be delivered through the joining up of services locally through collaborative commissioning approaches. “There is much diverse expertise in the system, but with vision, consultation and integrated discussion the sum can be so much more” (Rothia, *et al*, 2008 p.140).

Dawson and Singh-Dhesi (2010) carried out an evaluation of 10 years of the Child Behaviour Intervention Initiative (CBII) in Leicester City. The CBII consisted of three teams of family support workers, CAMHs specialists and EPs. Families could self-refer to the CBII and various interventions were used with CYP and families as well as training and support given. This initiative was also linked to the TaMHS project in Leicester City. Each of the interventions used as part of the CBII were evaluated using the SDQ. Pre and post testing scores completed by professionals about CYP were not statistically significant. However, parental reports indicated statistically significant effects post intervention. 60% of parents saw a positive improvement in their child and over 60% saw an improvement in family relations.

2.5 Summary of the literature review and rationale for the research questions

Whilst there is a growing evidence base about the prevalence of MH difficulties in schools and the efficacy of specific wellbeing interventions, there is limited research around the role of EPs in supporting MH and wellbeing in schools. Only twelve articles focusing on EPs' use of wellbeing interventions were identified and five articles explored EPs' involvement in whole school approaches to wellbeing. Only five research studies which examined the role of the EP in supporting MH and wellbeing were found; three of which were unpublished doctoral theses (Fee, 2011; Miller, 2016; and Durbin, 2010). The literature review identified a paucity of published research linking the role of the EP and MH and wellbeing in schools. Although Ashton and Roberts (2006) had asked SENCOs, "what is valuable and unique about the Educational Psychologist?" (p. 111) none of the studies identified in the systematic literature review had sought the views of SENCOs in regard to the EP role in supporting MH and wellbeing. Another gap in the research was found; most of the studies focused on how EPs support the MH and wellbeing of CYP and very few considered how EPs support the MH and wellbeing of school staff. The difference between the volume of literature available about MH and wellbeing in schools compared to the literature available about how EPs support MH and wellbeing in schools, highlights not only a gap in the research but an opportunity for the EP profession to fulfil a perceived need. The gaps in the research along with the rationale described on page seven guided the formation of research questions.

2.6 The Research Questions

The central question of this research was:

How do EPs and SENCOs view the role of the EP in supporting MH and psychological wellbeing in schools?

The research was also guided by these subsidiary questions:

1. Do EPs and SENCOs believe addressing MH and psychological wellbeing in schools is part of the EP role?
2. What value do EPs place on MH and psychological wellbeing work in schools?
3. Do SENCOs value the MH and psychological wellbeing work delivered by EPs in schools?
4. What examples are there of MH and psychological wellbeing support in schools from EPs at an individual, group and whole school level?
5. How can EPs support the MH and psychological wellbeing of staff in schools?
6. Are there any barriers to EPs offering this type of work?
7. How do EPs and SENCOs think the role of the EP could develop further to include MH and psychological wellbeing?
8. What training, skills and resources do EPs need in order to deliver this wellbeing agenda?

2.7 Chapter summary

Chapter two builds on the context for this study outlined in chapter one by providing an overview of the relevant literature around the role of EPs in supporting MH and psychological wellbeing in schools. The literature search is described and findings from other research grouped into three themes: EPs' use of therapeutic interventions to support MH and wellbeing; EPs' involvement in whole school approaches to wellbeing; and EP role in supporting MH and wellbeing more generally. Chapter two concludes with the research questions.

Chapter Three: Methodology

3.1 Chapter overview

This chapter provides a clear purpose and rationale for this research, followed by an outline of the ontological position adopted in the context of differing world views. Given the social constructionist position of the research, a critical evaluation of language around MH is discussed to further the understanding of the terminology used throughout the research. The nature of knowledge and how people find out about the world is addressed and the epistemological paradigm assumed provides a foundation for the choice of research design.

3.2 Purpose of Research

This research was primarily exploratory with elements of cooperative inquiry, a type of action research. Action research is an orientation to inquiry rather than a particular design. The researcher was interested in exploring the views of EPs and SENCOs about the EP role in supporting MH and psychological wellbeing in schools in order for the SENCOs to further their understanding of the EP role and consider how EP practice can be improved. Typically, in exploratory research little is known by the researcher about the participants' views; the participants are usually a group of people who have shared an unusual experience or are from a particular section of society. This research differs in that the researcher, a TEP and ex-teacher, was in (albeit on the periphery) part of this group of participants and therefore may have had some shared knowledge, understanding and beliefs. It was felt to be appropriate for elements of cooperative inquiry to form part of the research design in recognition of the link between the researcher and the participants. Riley and Reason (2015) suggested that in action research rather than separating the observer from what is observed, there is an emphasis on collaboration between researcher and participants to tackle a particular issue; "all those engaged in the inquiry process enter the process as persons, bringing with them their intelligence, their intentionality, their ability to reflect on experience and to enter relations with others" (p.169).

3.3 Ontology

Ontology is a view on the nature of reality (Hudson & Ozanne, 1988) and is associated with the history of philosophy. The way researchers view the world, and their perceptions about how knowledge is sought and developed, impacts on every aspect of their research; from the questions posed and data gathered to the methods employed and type of analysis used. Ontology provides a conceptual foundation for research and a worldview; are there objective and scientific truths to be discovered or are there different interpretations of reality influenced by language, culture and history? In simple terms there are two main ontological paradigms for research in psychology; positivism which postulates that laws and truths can be discovered through the manipulation and measuring of variables and relativism which assumes that there are no universal truths but rather socially constructed meanings which change over time. Between these two poles of the ontological spectrum are other paradigms which attempt to find a balance between positivism and relativism. Critical realism postulates that primary qualities are measurable aspects of physical reality and secondary qualities are subjective.

3.3.1 Positivism

Positivism may also be referred to as realism. In the 17th century the European worldview was fundamentally redefined during the age of Enlightenment. The dominant belief systems based on religion were challenged and an emphasis was placed on scientific methods. The age of Enlightenment lay the foundations for modernity which called for criteria to ensure statements claiming to reflect reality were true. This was an important period in history when people were encouraged to question superstitions and the idea that humans were solely followers of the word of God. The Christian beliefs about creation and salvation were questioned and general rules of reasoning introduced. The positivist paradigm postulates that there are facts about the world that we can discover, describe and understand. Ashworth (2008) stated that the dominant ontological position for research in the natural sciences as well as social sciences is positivist which takes “the orthodox view of the person as

being part of a natural system of causes and effects” (p. 4). The central premise of positivism is that there is a unitary real world where only processes, events and characteristics which can be tested have a claim to truth. Positivist researchers view and describe the world in terms of measurable variables and how they interact with each other. They seek to discover scientific laws which can be generalised, applied to future research and, as such, form a knowledge-base. The positivist paradigm influenced the movement away from psychology being the science of consciousness towards behaviourism (Watson 1878-1958), the scientific study of behaviour whereby so-called objective observations were carried out by someone other than the person undergoing the experience. Ashworth (2008) argued that this shift toward a focus on measurable responses had an unfortunate impact on the development of qualitative psychology because it directed the attention away from personal perspectives and meanings, the idiographic uniqueness of people and social relatedness.

3.3.2 Post positivism and critical realism

Post positivism takes the position that there are truths about the world and existence but humans will never be able to fully understand them. Critical realism is linked to post positivism; critical realists recognise that human ability to observe and measure phenomenon objectively is fallible. Whilst they believe that there is a reality, this cannot be fully known or understood with certainty. Critical realist researchers study people and their lived experiences by using as many and varied means as possible, therefore they utilise and see value in both quantitative and qualitative research methods.

3.3.3 Relativism

The 20th century era known as postmodernism marked a departure from the ideologies of the age of Enlightenment. Philosophers became sceptical about the concept of objective realities and discovery of truth. This movement away from modernity is associated with a relativist ontology, sometimes referred to as interpretivist paradigm. This emerged as a critique of positivism and considers meanings or experiences to be time, culture and value bound. The ‘knowledges’ about the world acquired under this paradigm are socially constructed rather than objectively determined (Carson,

Gilmore, Perry & Gronhaug 2001, p.5). Psychological approaches such as phenomenology, existentialism, hermeneutics and social constructionism can, although not exclusively, fall under the umbrella of relativist ontology.

3.3.4 The World as Construction

Kelly (1955) proposed that people's actions are influenced by their constructs of the world rather than the way the world actually is. His theory of personal constructs postulates that people view the world according to their own categories of interpretation, which adapt according to their own unique experiences. Around the same time that Kelly was theorising about personal constructs, Mead's (1863-1931) earlier work on symbolic interactionism was influencing social research and laying the foundations for the social constructionist orientation. Mead (1934) proposed that social processes come before the individualisation of thought as reflected in the relationship of communication between infant and parent.

3.3.5 Social constructionism

A social constructionist worldview takes into account the impact of history, culture and language when considering human experience and perception. Ashworth (2008) suggested that "social constructionism moves in the postmodern direction [which] leads to one form of qualitative psychology" (p.23-24). Willig (2008) described research from a social constructionist perspective as exploring the differing ways that social realities can be constructed in a culture, how these constructs are used and the implications for human experience. Given that this research takes a social constructionist worldview, it is acknowledged that both the focus of the research, and the findings presented, are socially constructed. Therefore, it is important to explore the language and discourse around MH and wellbeing.

3.3.5.1 *Social constructs of MH*

As mentioned previously, MH is viewed in this research as a fluid construct which shifts and changes over time and across cultures. Walker (2006) argued that the medical and traditional psychological vocabularies around mental ill health, assessment, diagnosis and treatment do not represent reality but rather have created it. Conrad and Barker (2010) examined research around the social construction of illness in the field of medical sociology. They highlighted the importance of cultural meaning for certain illness, such as MH conditions, which are stigmatised. Conrad (1987) argued, from a constructionist viewpoint, that there is nothing intrinsically stigmatising about a condition; instead it is the social response to that condition that creates stigma. Rather than dismiss mental ill health as not real, Conrad and Barker (2010) argued that a “constructionist approach takes the subjective experience of illness seriously, examining the personal and social meanings of illness, and exploring how illness is managed in the social contexts that sufferers inhabit” (p. s72). This research takes the position that EPs and SENCOs are well placed to have a positive impact on the changing construct that is MH, as they may be naturally adopting a biopsychosocial model which includes multiple influences on a spectrum of good to poor MH to reduce stigma, and to emphasise the importance of focusing on wellbeing in schools to ensure good MH for all.

3.3.6 *Participative Worldview*

Reason and Bradbury (2001) described an alternative ontology, participative worldview, which takes into account power imbalances and attempts to redress them by acknowledging that all people entering into the inquiry process bring with them their own intelligence, ability to reflect on experiences and interact with others. Reason and Riley (2008) suggested that a participative worldview directs research towards a science of persons which “embraces a ‘postmodern’ sentiment in attempting to move us beyond grand narratives towards localized, pragmatic and constructed practical knowings that are based in the experience and action of those engaged in the inquiry project” (p. 209).

3.4 Epistemology

Willig (2008) stated that “epistemology is a branch of philosophy concerned with the theory of knowledge” (p.4). A researcher’s view of the world guides the epistemological position they adopt when finding out about a particular area of interest. Appendix C provides a map of the different ontological paradigms, their associated epistemological positions and how they influence research methodology. For research which adopts a positivist ontology the epistemology is techno-rational and deductive, suiting a quantitative methodology. This type of research aims to produce objective knowledge and assumes that the researcher is detached from that which is being understood. On the other hand, relativist research is concerned with subjective meanings and interpretations of human behaviour, and assumes a transactional epistemology whereby the researcher cannot be separated from what is being explored. Research such as this, which adopts a transactional and social constructivist epistemology, typically uses qualitative methods.

3.4.1 Cooperative inquiry

Reason and Riley (2008) described cooperative inquiry as “part of the wider rich and diverse family of action research approaches” (p.207). In action research the distinction between researcher and participant fades, all those involved become co-researchers contributing to all phases of the research. An important element of this research was the cooperative relationship between all the co-researchers with less of a focus on the definition of roles e.g. principal researcher and participants.

This research aimed to be conducted with people as opposed to being imposed on people. Reason and Bradbury (2001) proposed that action research is an emergent process which responds to current issues, provides opportunities for communication and is strongly value-orientated. Cooperative inquiry allows opportunities to celebrate multiple ways of knowing and in some cases can be used for political purposes. Reason and Riley (2008) suggested that critical and feminist psychologists may find this type of research effective in bringing about social change. Heron and Reason

(2001) argued that unlike traditional academic research, cooperative inquiry allows issues of common interest to be addressed and transformed. The rationale behind this research is value-led and aims to address a perceived need; for EPs and SENCOs to create a shared understanding about the importance of schools focusing on MH and wellbeing, and how EPs can support this.

With pure cooperative inquiry (as described by Heron and Reason 2001), everyone involved takes an active role in all phases and decision of the research. This is where this research cannot claim to be pure in the cooperative inquiry methodology, but rather use elements of it. With the principal researcher carrying out the research as part of the doctoral training, the early stages of decision making and postulating of questions was not done collaboratively. However, the latter stages of the research are more collaborative in nature and it is hoped that the research will continue after what is described in this thesis. Therefore, this research aimed to lay the foundations for an ongoing cooperative inquiry group to allow the cycles to move several times between reflection and action.

Reason and Riley (2008) described the fourfold extended epistemology of cooperative inquiry as: experiential knowing (stemming from direct encounters with a person, place or thing); presentational knowing (expression of experiential knowledge through aesthetic imagery); propositional knowing (draws on concepts and ideas); and practical knowing (knowing in action). In cooperative inquiry these different ways of knowing are harnessed through four phases. Heron and Reason (2001) described phase one as involving a group of co-researchers coming together to explore an agreed area. During this phase the co-researchers agree a focus for their inquiry, develop a set of questions together and plan a method for their exploration. Phase two involves the co-researchers becoming co-subjects and engaging in the agreed actions. Phase three is described as the “touchstone of the inquiry method” (Heron & Reason 2001, p.5) whereby the co-subjects engage fully in the process allowing a deeper understanding and a freedom from any preconceived notions about the focus area. During phase four the co-researchers come back together to share their experiential and practical data. This phase allows reflection on the ideas initially constructed during phase one in light of the actions which took place during phases two and three. The group may reframe co-constructed ideas or change elements of their research procedures. They may also choose a new element of the overall focus

for their next cycle of action. The research then continues through several cycles of the four phrases.

3.4.1 Summary of ontological and epistemological position of this research.

This research adopted a relativist ontology; in particular a pairing of social constructionism and participatory paradigms. A transactional epistemological position was taken, whereby the researcher was not separated from what was being researched and elements of cooperative inquiry were used. This research explored the individual experiences and opinions of EPs and SENCOs with regards to EP role in promoting MH and psychological wellbeing in schools in order for the SENCOs to further their understanding of the EP role and consider how EP practice can be improved. The research was therefore best suited to a qualitative methodology.

3.5 Research Design

This research design was entirely qualitative. Due to the cooperative inquiry influence there were several stages to the research, as represented in Figure 1. At stage one the researcher actively explored the services available to schools, CYP and their families in relation to MH and psychological wellbeing in the local authority where the research took place. The researcher expressed an interest in the area of MH and psychological wellbeing to the EP team during a team meeting and to other members of the wider service when opportunities arose. This led to the principal researcher joining a learning set made up of other EPs, trainee EPs and assistant EPs, which aimed to carry out reading and research in the area of MH and emotional wellbeing during allotted CPD sessions. The researcher attended a joint meeting with CAMHS colleagues to discuss the use of a consultation model of service delivery. During stage one the researcher also carried out a pilot interview with a SENCO. The first stage naturally led to stage two; recruitment of four EP participants.

At stage two the EPs carried out a pre-interview activity to reflect on their understanding of what MH and wellbeing in schools meant to them. At stage three the EPs were individually interviewed and then, at stage four, they recruited their own

SENCOs and gave the principal researcher the relevant contact details. At stage five the SENCOs engaged in the same pre-interview activity as the EPs and at stage six the SENCOs were interviewed individually. At stage seven, the working party, the SENCOs came together with the principal researcher to validate the data analysis, finalise the nature of the findings and decide upon next steps. The research findings and recommendations were disseminated at stage eight.

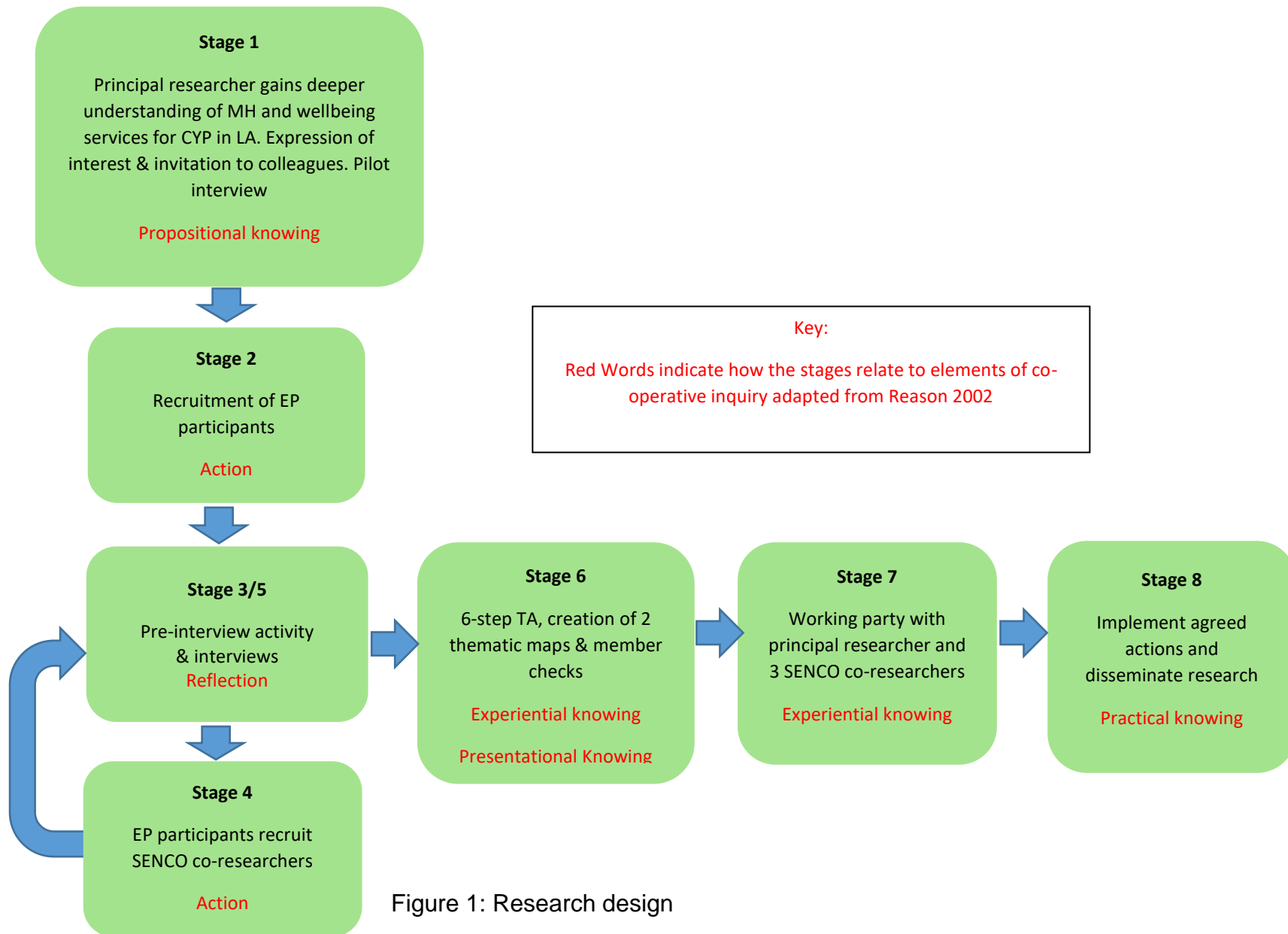


Figure 1: Research design

3.6 Research Technique

This research used two main techniques; semi-structured interviews and the development of a working party.

3.6.1 Semi-structured interviews

“Semi-Structured interviewing is the most widely used method of data collection in qualitative research” (Willig 2008, p. 29). Semi-structured interviews were chosen for this research in order that rich and detailed data was gathered reflecting the views, opinions and experiences of the co-researchers. The researcher did not chose to carry out structured interviews or questionnaires, as these techniques would not fit with the epistemological position of the research and would not be flexible enough to truly explore the EP participants’ and SENCO co-researchers’ views and experiences. The researcher explored the idea of carrying out a focus group to gather data, however, it was acknowledged that there may have been several power imbalances (between researcher, participants and co-researches, EPs and SENCOs and senior EPs and main grade EPs) which could have influenced the data set. It was decided that more open, honest and rich data would be collected if the EPs and SENCOs were first met individually with a view to the development of a working party at a later date. Semi-structured interviews enabled the researcher and participants/co-researchers to engage in dialogue with the response to each question shaping and moulding the next. Without sticking rigidly to prepared questions, the researcher was able to further explore areas of interest which arose in a more natural way. Smith and Osborn (2008) proposed that, when carrying out semi-structured interviews, the researcher should be guided by an interview schedule rather than be dictated by it. Semi-structured interviews in this research enabled: rapport to be established between researcher and co-researchers; the probing of interesting areas that arose; changing the order of the questions if felt to be appropriate; and the researcher to follow the interests of the interviewee. Due to the researcher’s training in empathic listening and responding, probing and summarising (Egan 2013) and understanding of nurture principles (Lucas, Insley & Buckland 2006) a relaxed interview experience was created. The semi-

structured interview schedule was prepared by the interviewer according to the central research question and was altered slightly following a pilot interview.

3.6.2 Pilot interview

The pilot interview with the principal researcher and a SENCO took place in October 2016. The interview was audio recorded and transcribed but not thematically analysed. It was apparent that the SENCO had not considered MH to be part of the EP role; however, this was found to be due to their initial perception of what MH is, namely a medicalised construct of MH difficulties. As the interview progressed the SENCO's perception of what MH and wellbeing in schools means began to widen. Through discussion with the SENCO after the interview, two changes to the semi-structured interview process were made:

1. A pre-interview activity was designed to promote thinking around what MH and psychological wellbeing in schools means to each participant and co-researcher at least three working days prior to the interview. This also gave the participants and co-researchers an opportunity to think about MH and wellbeing in schools in relation to their own practice. The pre-interview activity can be found in appendix D.
2. Two questions were added to the end of the schedule about what each participant/co-researcher would like to see happen as a result of this research, and who the findings should be shared with. The final semi-structured interview schedule can be found in appendix E.

3.6.3 Working party

Reason and Riley (2008) suggested that cooperative inquiry “depends on the development of healthy human interaction in a face-to-face group” (p. 215). The working party brought together the principal researcher and the SENCO co-researchers to explore the views of both the EP participants and the SENCOs co-researchers about the role of EPs in supporting MH and wellbeing in schools. The purpose of the working party was to further the SENCO's understanding of the EP role

in supporting MH and wellbeing in schools and consider how EP practice could be developed in this regard. The aims of the working party were to review the thematic maps for both the EP participants and the SENCO co-researchers, carry out member checks for the thematic analysis of the SENCO interviews, consider the implications for both EP and SENCOs and agree next steps including dissemination. By doing so, the research aimed to empower the SENCOs to shape the future of the services being offered to them. It should be noted that the next steps agreed during the working party will lead to further cycles of action and reflection which will continue outside the scope of this thesis.

3.7 Data Collection

The semi-structured interviews were audio recorded. The recordings were securely stored on an encrypted laptop and only shared with a professional transcriber. The transcriptions did not include any names to safeguard the anonymity of the co-researchers. Once the transcriptions had been completed the audio recordings were permanently deleted. To protect the anonymity of the EP participants and SENCO co-researchers, no names have been used in the results chapter. The researcher hopes to publish the research towards the end of 2017 and the anonymised transcripts are being kept on an encrypted laptop for further analysis or future reference.

3.8 Participants and co-researchers

With this research being driven by a social constructionist world view, a focus on prevalence, population representation and other quantitative notions of sample sizes was not important. However, in order to explore the views of the two groups chosen (EPs and SENCOs), it was important to consider how many interviews would enable rich data and aim to reach saturation of views within the groups. When deciding how many participants and co-researchers would be interviewed, the method of data analysis was considered important. There are no universally agreed minimum and maximum numbers of participants needed for thematic analysis; however Braun and Clarke (2013) recommended that for small scale studies six to ten interviews should be conducted. Other considerations important for deciding on the number of

participants and co-researchers were; “the quality of data, the scope of the study, the nature of the topic, the amount of useful information obtained from each participant” (Morse, 2000). The principal researcher, having worked closely with EPs and SENCOs for a number of years, was confident that the data gathered from both groups would be rich, reflective, useful and extensive. The study was entirely focused on the LA in which the research took place and therefore it was not intended to produce results that could be generalised to a wider population. Hence, the scope of the study fitted a smaller number of participants and co-researchers. Although it was planned that six EPs and six SENCOs would be recruited, due to the nature of real world research and the context of the service in which it took place, only four EPs and three SENCOs were recruited. This is further discussed in the limitations (Chapter 5).

The research took place in an EP service in a large county in the south-east of the UK. The recruitment process started in May 2016, by sending an introductory email with a letter outlining the research (appendix F) attached to all EPs in the service. The researcher also attended two team meetings to discuss the research questions and ask for volunteer co-researchers. EPs who expressed an interest were sent more detailed information via email and given opportunities to answer questions before committing. They were then sent consent forms by email which outlined their right to withdraw at any stage (appendix G). The consent forms were also taken to each interview and signed by both interviewer and interviewee. The researcher recruited four EPs from the service. The EPs’ roles varied; one was a Team manager, one was a senior EP and two were main grade EPs. Two of the EPs went through the doctoral training route while the other two were teachers before completed a masters in Educational Psychology. The number of years practicing as an EP varied from 13 years to first qualified year.

Three SENCOs/INCOs were recruited. It was felt that as the EPs had a working relationship with their SENCOs, they would be best placed to recruit their own SENCOs and ensure that informed consent was gained. It was hoped that this would also give the EPs a sense of active participation in the research right from the start. The SENCOs were provided with the information sheet and consent form by their own EPs. Whilst it was planned for all EPs to recruit their own SENCOs, one was not able to due to not having a patch of schools.

It is acknowledged that as the participants and co-researchers had volunteered to engage with the research they may have had a pre-existing interest in MH and wellbeing in schools. For the EPs in particular, it could be hypothesised that they may be more likely to see the role of the EP to include a MH and wellbeing focus than other EPs in the service. Therefore, the research does not claim to present views that are representative of all the EPs in the local authority in which it took place.

3.8.1 Inclusion criteria

The inclusion criteria for participants and co-researchers were;

- Employed by the Local Authority either as an Educational Psychologist or SENCO/INCO.
- Willing and able to commit to all the stages of the research.

3.9 Role of the researcher

Finlay (2002) suggested reflexivity as the defining feature of qualitative research. The researcher's views, assumptions and beliefs were made explicit throughout this research. Reflexivity was regularly discussed and recorded throughout the research process. Three different mediums for reflection and reflexion were utilised; university tutorials with the Director of Studies (recorded on the university research database), placement supervision sessions (research was a standing item), and a research diary.

3.10 Data Analysis

After each interview, the researcher listened to the audio recording to reflect on both the process and the content. This enabled the researcher to consider the best ways of encouraging the dialogue to take interesting and possible new directions whilst still considering the guiding research questions. It also enabled the researcher to become familiar with the interviews before transcription. The interviews were transcribed by a professional transcriber who was requested to carry out a full verbatim transcription

(see appendix H for instructions given to transcriber). Once each interview was transcribed the researcher checked them twice while listening to the audio recordings. This allowed the researcher to become immersed in the data. Once all of the interviews were transcribed by the professional transcriber and checked by the researcher, the audio recordings were deleted. The researcher used a six-phase thematic analysis (Braune & Clarke, 2006) to analyse data items and data sets. For the purpose of this research a data item represents each interview and a data set is all the interviews for each group; EP participants and SENCO co-researchers. The data corpus is the entire data collected for this research and was the focus of the working party phase when two thematic maps were brought together to inform the next steps. A description of the structure of the thematic analysis process is presented in the sections below.

3.10.1 Thematic Analysis

Braun and Clarke (2006) suggested that researchers should be explicit about a number of choices they make prior to starting the thematic analysis. Those choices will be made explicit here for the sake of transparency and trustworthiness.

3.10.1.1 *Rationale for choosing thematic analysis*

Braune and Clarke's (2006) six-phase thematic analysis was chosen after considering a number of options, briefly described below. Interpretative phenomenological analysis (IPA) was rejected as the research questions focused on the co-researcher's views, values, beliefs and understanding of the EP role, rather than their lived experiences. Grounded theory methodology was developed as a means to create theories from a data set. This research was concerned with exploring views, co-constructing a shared understanding of the EP role and formulating next steps, rather than contextualising and developing new theories. Therefore, grounded theory was not considered a best fit for this research. Discourse analysis was considered, however, it was discounted as Willig (2008) recommended it should be used to analyse unsolicited and naturally occurring conversations, whereas this research used semi-structured interviews guided by the research questions. Since discourse analysis is about exploring meaning within the language used, it was decided that TA

was more appropriate as this research intended to identify commonalities and themes by taking the language used in the interviews at face value.

3.10.1.2 What counts as a theme?

Due to the small number of participants and co-researchers, it was important to consider the prevalence of groups of codes that were to be counted as themes. The principal researcher decided that in order for something to be counted as a theme, codes related to the theme should be found in all data items for each of the two groups; EPs and SENCOs. The principal researcher also decided to provide a rich description of the entire data set rather than focus on just one aspect of it because, whilst the interviews were only semi-structured in nature, they were guided by the research questions which were focused on the role of the EP in supporting MH and wellbeing in schools.

3.10.1.3 Latent and semantic themes

Braun and Clarke (2006) outlined two different traditions for identifying themes in thematic analysis; latent themes and semantic themes. For this research the principal researcher began the thematic analysis by coding the interviews and identifying semantic themes which were explicit and at a surface level. During the working party the co-researchers together identify latent themes from the semantic themes already identified. This decision was based on the idea discussed by Braun and Clarke (2006), that when “a thematic analysis at the latent level goes beyond the semantic content of the data and starts to identify or examine the underlying ideas, assumptions, and conceptualisation ideologies” (p.13). It can be argued, therefore, that by doing this part of the analysis collaboratively the research fits within the social constructivist paradigm.

3.10.1.4 Inductive thematic analysis

While acknowledging, according to the epistemological position of this research, that the research cannot be separated from what is being researched, the data analysis was inductive rather than theory driven in order to ensure that themes were strongly linked to the data. The researcher did this by attempting to put aside any preconceived notions of what the themes should be and by using language, words and phrases that were as close to the data as possible.

3.10.1.5 Six-stage thematic analysis

A staged process of thematic analysis was used to produce the thematic maps, guided by Braune and Clarke's proposed six-stages (2006 p.87):

1. The principal researcher became familiar with the data first experientially during the semi-structured interviews with the EP participants and then through listening to audio recordings several times. Following the recruitment of a professional transcriber (see appendix H for transcriber instructions) the principal researcher read and re-read the transcripts whilst listening to the audio recording to check for accuracy and make notes of initial ideas for codes.
2. Data from each of the EP interview transcripts was then transferred into a TA table with four columns; line numbers, raw data, codes and themes. See appendix I for an extract of the TA table. Once all of the lines of the raw data were numbered, initial codes were generated in a systematic nature using the notes taken from stage one. Interesting or poignant extracts of the raw data were highlighted for later use.
3. The initial codes were printed using a different font for each participant, and cut out into individual pieces of paper. The codes were then grouped to start the search for themes. Envelopes were used to group codes together and initial ideas for themes were written on the envelopes in pencil. This stage

enabled the identification of themes and subthemes and ensured that each theme contained codes from all the EP participants. See appendix J for photographic evidence of this stage.

4. The themes and subthemes identified during stage three were then reviewed by referring back to the coding tables which contained the raw data and checked against the highlighted extracts and codes. The fourth column of the TA tables were then completed at this stage to reflect the themes. These themes and subthemes were then used to create a provisional thematic map.
5. An ongoing analysis to refine each theme and the overall message given by the thematic map took place. This included consultation between the principal researcher and the Director of Studies, participant member checking and referring back to the raw data and research questions (see appendix K). During this stage, some of the theme and subtheme names were changed slightly to mirror the language used in the extracts. Some of the subthemes were combined and two overarching themes were identified.
6. The final thematic map along with extracts describing the overarching themes, themes and subtheme was then reported in chapter four of this thesis.

These stages were followed again to analyse the SENCO interviews, with the only difference being that at stage five the member checking and refining of themes took place during the working party.

3.11 Trustworthiness and Credibility

The purpose of research which uses a qualitative methodology is not to produce valid and reliable results which claim to be generalisable and representative of a given population. Instead qualitative research tends to be concerned with meaning and finding out about how people make sense of the world. However, critics of qualitative methodologies, particularly those with a positivist persuasion, express concerns about lack of rigour in qualitative research. It is, therefore, important to consider the quality of this research in a different way. Lincoln and Guba (1985) used the term

'trustworthiness' to review the quality of qualitative research. They described how four factors can be used to judge this; credibility, transferability, dependability and confirmability.

Credibility is the qualitative researchers' equivalent to internal validity, which seeks to ensure that quantitative studies actually measure or test what is intended. In qualitative research, credibility deals with the question, "How congruent are the findings with reality?" (Merriam, 1998 p.6). However, with this research adopting a social constructionist paradigm, reality was not sought but rather the findings aimed to reflect the views of the two groups participating acutely. Firstly, this research ensured credibility by using appropriate and well recognised research methods. By using cooperative inquiry, the principle researcher was able to develop an early familiarity with the culture of the participating organisations (see Figure 1: Stage 1 on page 36). Secondly, informal member checks were carried out throughout and at the end of each interview. More formal member checks of the themes identified at the working party stage. Mertens (2005) described member checks as being the single most important criterion in establishing credibility of qualitative research. Shenton (2004) suggested that another strategy for ensuring credibility is the employment of "tactics to help ensure honesty in informants" (p. 66). In this research the principal researcher took measures to ensure that the interviews were relaxed, informal but at the same time private and confidential. All interviews were carried out in a place of each participant's/co-researcher's choice; in most cases in a pre-booked meeting room. With the interviewer's position of trainee EP and the reassurance that any dissemination of findings would be anonymous, it was felt that the participants and co-researchers were more open and honest than on other occasions when their views are sought during team/staff meetings or when asked by managers.

Merriam (1998) suggested that transferability is "is concerned with the extent to which the findings of one study can be applied to other situations" (p. 39). It is acknowledged that due to the participants being heterogeneous, i.e. from two different professions, and self-selecting, it would not be appropriate for the researcher to suggest that the findings will be generalisable to other EPs, SENCOs or EP services or school. The action research element of this research means that this generalisability is not important but rather the outcomes for the EPs, SENCOs and their services. However,

it was hoped that themes and recommended outcomes would be seen as transferable to other EP services and schools.

Dependability is concerned with the ensuring sufficient detail is given so that future researchers would be able to carry out the same study, albeit not necessarily to produce the same findings. Qualitative researchers, using a social constructionist paradigm, acknowledge that it would not be possible or relevant to replicate studies as each study is context, time and culture specific. However; it is important that those reading this research can gain a full and detailed understanding of the methods and data analysis used. The principal researcher has provided transparent and detailed descriptions of all stages of the study. Braun and Clarke's 15-point checklist of criteria to ensure a good thematic analysis (2006, p. 36) was used. The data was interpreted and made sense of rather than simply paraphrased through giving sufficient time and equal attention to each data item during the coding process. The principal research also went back to the original data frequently during all stages of the thematic analysis.

Shenton (2004) suggested that confirmability is concerned with ensuring that a study's "findings are the result of the experiences and ideas of the informants, rather than the characteristics and preferences of the researcher" (p. 72). This is challenging for researchers who do not prescribe to notions of objectivity. Whilst the principal researcher cannot claim to have omitted their beliefs, knowledge and assumptions from the research, an in-depth methodological description allows integrity of findings and the working party stage of the research enabled triangulation.

3.12 Ethical Considerations

All aspects of this research adhered to the British Psychological Society 'Code of Ethics and Conduct' (BPS, 2009) and the researcher referred to the 'Guidance on conduct and ethics for students' produced by the Health Care Professional Council (HCPC, 2012). A research ethics application was submitted to the Research Ethics Committee of the School of Psychology, University of East London, in January 2016 and approval was received in March 2016 (see appendix L for decision letter).

Willig (2013) suggested that as ethical dilemmas can arise at any stage in the research, it is necessary to stay ethically attuned throughout. This was particularly important for this research due to the cooperative inquiry element which required the participants to influence the direction of the research. A research diary was kept and ethical considerations were recorded.

3.12.1 Confidentiality and anonymity

The researcher ensured that the co-researchers understood that their participation in the research was not confidential due to the cooperative inquiry nature and the working party stage involving meeting the other co-researchers. This was made explicit in both the information letter and the consent form and was discussed at the beginning of each interview. The researcher was also aware that the interviews took place in the EP service offices and in schools, which meant that colleagues may have asked or known about the research and their involvement. All co-researchers were assured, however, that the data gathered would be anonymised so that their comments or quotes would not be associated with them. This was particularly important to the EPs as they knew that the researcher would be required to present their research findings during a CPD day.

The semi-structured interviews were audio recorded and securely stored on an encrypted laptop. The transcriptions did not use any names; instead referring to interviewer (I) and respondent (R). Once the transcriptions were complete and checked, the audio recordings were permanently deleted. The researcher made explicit to the co-researchers, however, the hope to publish the research towards the end of 2017 and therefore anonymised transcripts were to be kept for further analysis or future reference. Co-researchers were made aware that no names would be used in the write up of the findings.

3.12.2 Sharing of the data

Anonymised data were shared with the researcher's Director of Studies and made available to the research examiners, as part of the university's process. An analysis of the data, in the form of themes with some examples of anonymised transcript extracts, were shared with all the other participants in line with the cooperative inquiry nature of the research. It is hoped that the research will be disseminated to the Principal EP of the local authority in which the research took, other EPs during a whole-service CPD day, the Head Teachers of the schools that the SENCOs work in and possibly with other SENCOs at cluster meetings. The research will be presented to tutors and other trainee EPs at the University of East London in July 2017. Once included in the write up, the data analysis will form part of the researcher's thesis which will become a public document.

3.12.3 Power relationships

It was important that power relationships were considered in this research. It could be argued that in exploratory research the participants are usually from a marginalised group. Therefore, there can be a perceived power imbalance tipping towards the researcher. In this research, however, the researcher, a trainee EP, aimed to gain the views of EPs and SENCOs and the power imbalance may have tipped towards the participants and co-researchers at some points of the research. The researcher was aware that the EPs and SENCOs were giving up their valuable time to engage in the research and therefore the researcher was conscious not to send too many emails requesting possible interview dates and when arranging the working party. These practical and organisational elements of the research were, therefore, impacted by a possible power imbalance. This is will be addressed further in the discussion. The power relationships between the EPs and SENCOs was also considered. As the SENCOs were asked to come to an unfamiliar office for the working party, the researcher took steps to ensure they were welcomed and felt as comfortable as possible. Prior to the working party, all co-researchers were emailed by the researcher with directions to the office and parking instructions. The researcher met the SENCOs

in the reception of the office building to greet them and escort them to the training room. The researcher also provided lunch for all co-researchers during the working party to create a relaxed, informal and nurturing environment. It was also made explicit at the beginning of the working party that all views and opinions would be equally valued and the importance of honest open discussion was emphasised.

3.13 Chapter summary

Chapter three outlines the research design and methodology of this study. It is acknowledged that due to relativist ontology and action research nature of this study the findings would probably be different if replicated in a different LA at a different time. It is important however, for the process and ethical considerations to be made clear to ensure the trustworthiness and credibility of this study.

Chapter Four: Findings

4.1 Overview of chapter

The previous chapter outlined the ontological position of the research, the research design, the process of data collection and analysis and ethical considerations. This chapter discusses the findings following the data analysis of both the EP interviews and the SENCO interviews. The identified themes are illustrated in two thematic maps and quotations have been included to expand and evidence the analysis process. Following a detailed description of the overarching themes, themes and subthemes identified from the interview data, the outcomes of the working party are outlined.

In accordance with the inductive nature of the TA, this chapter is organised in relation to the themes identified rather than the research questions. The subsidiary questions are addressed implicitly through the description of the overarching themes, themes and subthemes identified in the TA of the interviews. The findings are, therefore, presented in three parts; findings representing the EPs views, findings representing the SENCOs views and findings from the working party. The discussion chapter will then make explicit links between the findings and the wider literature.

4.2 EPs' views of their role in supporting MH and wellbeing in schools

Two overarching themes were identified from the analysis of the EPs interviews: important contextual factors relevant to the EP role in supporting MH and psychological wellbeing and the EP role in supporting MH and wellbeing.

Organised under the first overarching theme are three themes:

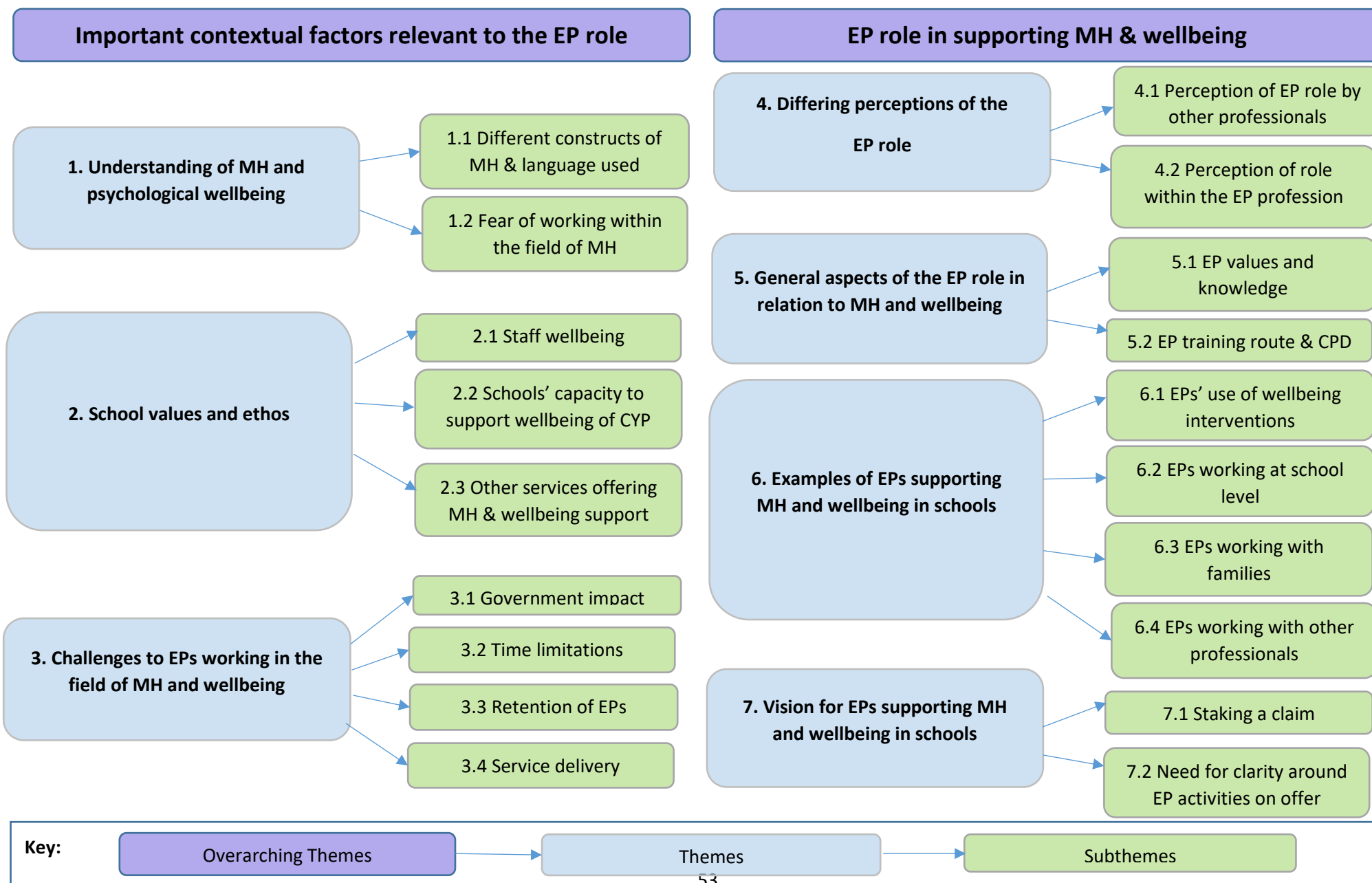
1. Understanding MH and psychological wellbeing;
2. School values and ethos;
3. Challenges to EPs working in the field of MH and wellbeing.

Under the second overarching theme there are four themes:

4. Differing perceptions of the EP role;
5. General aspects of the EP role;
6. Examples of EPs supporting MH and wellbeing in schools;
7. Vision for EPs supporting MH and wellbeing in schools.

Within each theme, several subthemes were identified as seen in figure 2. It should be noted that there are some overlaps between some subthemes and themes due to the nature of the semi-structured interviews and the richness of the data. Codes were arranged into subthemes and subthemes into themes using a 'best fit' approach. Any overlaps are made explicit in the extracts presented below.

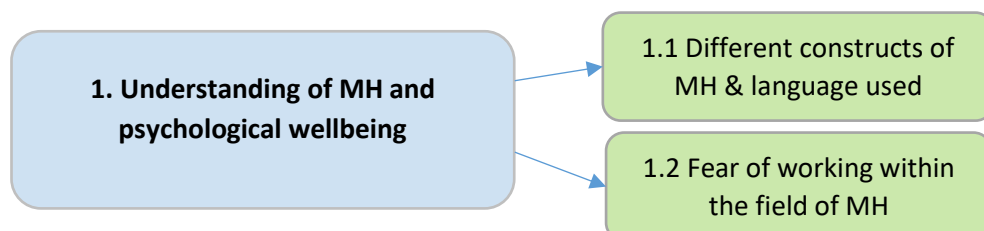
Figure 2: Thematic map depicting EPs' views of their role in supporting MH and psychological wellbeing in schools



4.2.1 Overarching Theme 1: Important contextual factors relevant to the EP role

4.2.1.1 Theme 1: Understanding of MH and psychological wellbeing

This theme reflects the EPs views of differences in understanding of MH and psychological wellbeing within and between different professions. The differing constructs of MH and language used were considered and the fear of working within the field of MH was raised.



4.2.1.1.1 Subtheme 1.1: Different constructs of MH and language used

The TA of the EP interviews highlighted that MH and psychological wellbeing ‘is such a broad topic’ (Participant 2, line 144) which is constructed in different ways by different people. As discussed in chapter 1, there is a great deal of different language used depending on an individual’s understanding of MH and psychological wellbeing. Participant 1 expressed her preference in terms of language;

‘I tend to use emotionally healthy or emotional wellbeing, emotionally well because I think that sits better. It doesn’t feel so kind of clinical necessarily.’

(Participant 1 lines 39-40)

This position fits with the EP professions’ move away from a within child or medical model of practice towards an ecological approach. One EP suggested that part of their role was to help schools change their understanding of MH and wellbeing so that it became more school-based and less clinic-based. She talked about her role in supporting a CAMHS in schools project.

‘So the aim really is for them to become less clinic based in the project any way and be more schools focussed so they will be in these pilot schools, they will be visible regularly literally in the setting.’

(Participant 1 lines 101-106)

‘So I’m hoping that this will really shift how schools see mental health services’

(Participant 1 lines 112-113)

The EPs' views of the language used around MH and wellbeing is influenced by Government guidance and legislation. For example, the Code of Practice (2014) ensures that MH is considered when an EHCP assessment is carried out. Some EPs are reluctant to use the term MH due to its link with the medical model.

'when the Code of Practice came out I was surprised that mental health wasn't emotional health and wellbeing.'

(Participant 1 lines 48-49)

'in our reports we have to talk about it and the move away from talking about behaviour towards mental health. But I kind of thought of it as being the same thing as wellbeing; emotional wellbeing.'

(Participant 1 lines 44-47)

The implementation of the Code of Practice (2014) marked a shift from professionals reporting or focussing on behaviour towards consideration of the underlying emotional states being communicated by CYP. Despite a possible reluctance by some EPs to use the term MH, the EPs interviewed reflected the profession's support for the move away from behaviourist approaches.

'I think this is so important that is absolutely part of what our role is to stop people talking about behaviour.'

Participant 2 (lines 282-283)

'It's what is it that's going on for that child that means that we see this and I think it's a message we have to get across all the time and give members of staff another a kind of another language, a sort of different discourse around behaviour so it's not just about what we see it's about the needs of that particular child.'

Participant 2 (lines 284-288)

Participant 3 spoke about conversations with school staff being focussed on behaviour rather than MH and wellbeing.

'They want to focus very much on behaviour and don't necessarily get the link about the emotional; what's going on behind that behaviour.'

(Participant 3 lines 68-70)

In relation to the different constructs of MH and wellbeing, participant 1 proposed a role for EPs;

'looking at the different perspectives would be useful and perhaps marrying that gap, potentially there may not be one, marrying that potential gap between school's perception and other professions' perception of mental health and also the professions who work within that realm.'

(Participant 1 lines 426-430)

How an individual or group constructs MH and wellbeing, will influence how comfortable they are in discussing MH or working within the field of MH. Participant 1 reflects on this;

‘When you think about mental health, you could immediately think about that sort of clinical model and that could be quite scary, can’t it? And you could think that’s not something I am delving into but if you see it as emotional wellbeing then it becomes much broader I would say.’

(Participant 1 lines 416-420)

4.2.1.1.2 Subtheme 1.2: Fear of working within the field of MH difficulties

The concept of fear of working within the field of MH difficulties was also evident in the EP interviews. Participant 2 spoke about this fear within the teaching profession and also within the EP profession.

‘they feel uncomfortable working within the field of mental health so I think actually now I am thinking about it perhaps school staff feel worried about it and possibly EPs feel worried about it as well.’

(Participant 2 lines 129-132)

She went on to hypothesise the reasons that EPs might feel fearful to engage in MH work. One reason explored was the confidence and skills of EPs;

‘I think sometimes there is a real anxiety around involving yourself in mental health because is it a worry about actually doing something that would make things worse rather than better or is it just because it’s so messy and it’s complex’

Participant 2 (lines 491-494)

‘I think some people don’t go looking for it and probably don’t have conversations about it because perhaps they feel they don’t have the skills to do that.’

Participant 2 (lines 173-175)

Another reason that EPs may feel uncomfortable engaging in MH work was related to the pressures of statutory work.

‘if you don’t do that kind of work very quickly you can feel as if you can’t do that kind of work and you don’t have the skills to do it and you get kind of.... (the word that’s in my head is ‘stuck’) and it’s not that writing EHCPs isn’t important but you get left doing that kind of work and you feel perhaps as if you can’t offer anything else.

Participant 2 (lines 404-409)

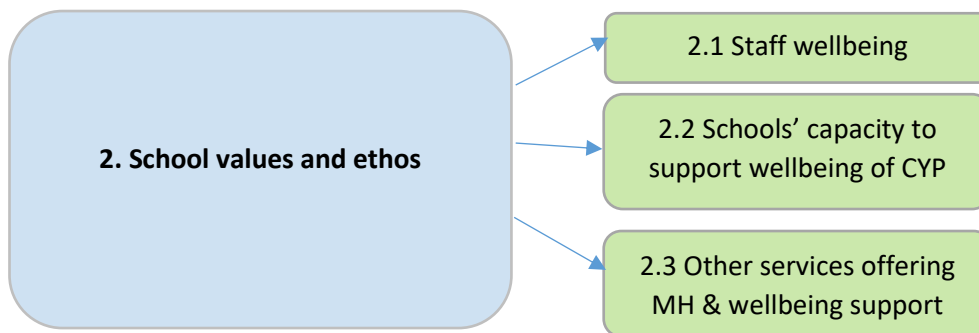
The impact of statutory work on EP confidence to engage in MH and wellbeing work was also reflected on by Participant 4;

'I don't think all EPs, and this is my opinion, will feel comfortable talking about mental health and wellbeing, offering advice and even thinking of being involved in any direct interventions for the school. I think they would feel a lit bit unequipped clearly if they've had years of doing statutory work.'

Participant 4 (lines 90-94)

4.2.1.2 Theme 2: School values and ethos

This theme was prominent in all the EP interviews. The impact of a school's values and ethos is perceived to be significant to the wellbeing of both staff and CYP.



4.2.1.2.1 Subtheme 2.1: Staff wellbeing

The EPs identified that the wellbeing of staff in schools is something EPs are concerned with. Participant 2 spoke about the wellbeing of head teachers.

'there were a number of head teachers and senior leadership members of staff who we felt that everyone else could access some kind of support but that they were quite an isolated group and they had to carry such a lot of responsibility over making decisions every single day about things.'

Participant 2 (lines 318-322)

'I don't think head teachers are used to showing their kind of vulnerable side it was difficult for them but after a while they really did and they were saying that it's very stressful being the end of the line and that its sometimes concerns about YP or sometimes it's a member of staff who's struggling or there's a discipline competency procedures that need to be followed.'

Participant 2 (lines 341-346)

SENCOs are the primary liaison within schools for EPs. Consequently the wellbeing of SENCOs is often a consideration for EPs. Participant 3 acknowledged the difficulties SENCOs face in their middle management positions.

'They're so sort of snowed under with stuff and some of them feel so pressured by the other teachers and by their senior leadership team so they feel quite stuck in the middle.'

Participant 3 (239-242)

The EPs interviewed also identified that teachers' workloads impact on their own wellbeing. Whilst schools often prioritise individual CYP for EPs to be involved with, EPs are considering the wellbeing of the circle of adults around the CYP.

'A lot of time focus on the pupils but I get that teachers are really stressed.'

Participant 4 (19-20)

'when I'm talking to their teachers or their parents I always like to check in on their own wellbeing as well before they even start to have a consultation so that I know where they are.'

Participant 1 (lines 174-176)

As discussed below in theme 6.1 (EPs use of wellbeing interventions), staff wellbeing is often a focus for EPs. Participant 1 spoke about work discussion groups that she had facilitated with staff working in a special school. Although the staff initially considered the work discussion groups helpful to focus on CYP, they began to see the benefit of using them to talk about their own wellbeing. However, this did not come naturally to them.

'After a while they had that relationship with us where they would start to talk about how they'd support each other and what they recognise about each other but it was really hard for them which is quite sad really.'

Participant 1 (lines 262-265)

The EPs recognised the link between the wellbeing of staff and that of the CYP. When interventions have been put in place to improve the resilience and emotional wellbeing of CYP, this has often had an impact on the staff as a whole. Participant 1 spoke about nurture groups in schools, and where teachers are able to use nurture principles to good effect.

'schools where they've got the nurture provision right you do see the impact of that on the teachers and staff definitely.'

Participant 1 (lines 351- 352)

4.2.1.2.2 Subtheme 2.2: Schools' capacity to support CYP with MH difficulties

All the EPs interviewed spoke about factors effecting schools' capacity to support CYP with MH difficulties. As acknowledged above, the wellbeing of staff as well as their willingness to consider MH and wellbeing in schools are important factors;

'Unless we have a school that is willing to take on board what we're talking about and aren't stressed I don't think we can do the other things very well.'

Participant 1 (lines 82-84)

Another factor effecting schools' capacity to support CYP with MH difficulties was reflected on by Participant 2. The prevalence and perceived increase in MH difficulties in CYP was discussed in relation to how schools could identify them and meet their needs.

'we've been looking at some government guidance about mental health and it kind of got me looking into (named county's) processes and statistics and it was saying that in (named county) up to 1 in 10 children could have a diagnosable mental health difficulty and I was really shocked by that because then I thought that means at least 2 or 3 children in every primary class'

Participant 2 (lines 92-99)

'Could they identify children? And in knowing that (1 in 10 statistic) I wondered what impact that has on school teachers; knowing that there are children in their class who we wouldn't just use this term emotional wellbeing but actually talking about mental health'

Participant 2 (lines 100-103)

Participant 1 reported that some schools are so focussed on academic achievement that they do not have the capacity to consider how well a pupil is emotionally cared for (lines 230-232). Participant 4 also reflected on how the pressure on schools to focus on academic outcomes can become all consuming;

'do they think that if your children are not emotionally well they won't be able to learn? Do they put that first and work on that? and then I don't think they all do. I don't think they all do. I think they see this as just another thing to do. I don't want to make a blanket statement that every school does that that but I think they still worry about the academic performance as opposed to the wellbeing and they feel under-equipped to deal with it partly because they're probably under a lot of stress'

Participant 4 (119-125)

Participant 3 reflected on the EP role in monitoring schools' values and ethos in relation to MH and wellbeing;

'I don't know if there are any checklists about school ethos and emotional wellbeing but I think giving schools something like that that they can think about.'

Participant 3 (436-437)

4.2.1.2.3 Subtheme 2.3: Other services offering MH and wellbeing support in schools

The EPs interviewed identified that schools perceive CAMHS to be the most relevant service when considering the MH and wellbeing of CYP.

'I think they think mental health straight to CAMHS. Often there is that direct link'

Participant 1 (lines 92-93)

The EPs also reflected on the difficulties that schools and families have experienced in accessing CAMHS;

'Well actually I've had in the last few weeks one young person who I've been involved with at my SEMH school and he's been known to CAMHS but CAMHS have discharged him. Why I don't know..'

Participant 2 (lines 205-209)

The shrinking of LAs and government changes in schools' funding have led to a perceived increase in schools commissioning outside services. Participant 2 spoke about a recent change with her allocated schools doing more commissioning and employing their own staff to support MH and wellbeing of CYP.

'I started thinking that, schools employ their own counsellors so I think more and more, certainly more than when I first started in the job, there was a kind of (named county) Counselling Service, a very long waiting times, very kind of tricky trying to get children into that whereas now schools employ their own counsellors, some schools employ their own play therapists.'

(Participant 2 lines 114-118)

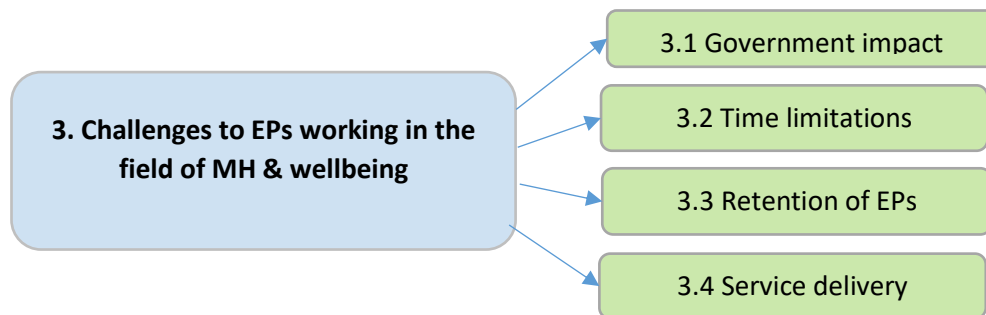
Some EPs also spoke about schools seeking support and advice from independent EPs;

'in my area they go to independent people because they say you can't do that because we know how busy you are.'

(Participant 2 lines 426-427)

4.2.1.3 Theme 3: Challenges to EPs working in the field of MH and psychological wellbeing

The third important contextual factor relevant to EPs supporting MH and wellbeing in schools is the challenges or barriers they face. The EPs identified several barriers they had experienced: the impact of government and austerity measures; time limitations; retention of EPs; and service delivery. It is acknowledged that there is an overlap between all of these subthemes.



4.2.1.3.1 Subtheme 3.1: Government impact

The scope of the EP role is thought to be impacted by the way government funds local services and by guidance and legislation. Participant 1 discussed her experience of being an EP at the time of a previous phase of re-structuring in the local authority.

‘There was a kind of uncertainty round it but then there was a re-structuring of the EP service and that’s when we became five teams, five different areas and because it was all to do with the government change as well school budgets were cut’

(Participant 1 lines 45-48)

Participant 2 identified that government guidance does not make it clear to schools that MH and wellbeing is part of the EP role.

‘we’re left out of the kind of guidance that schools get so even from government guidance it doesn’t really talk much about well it might mention it here and there but you don’t hear much EPs and mental health put together very often in terms of government guidance that’s sent out to schools’

(Participant 2 lines 473-477)

Participant 3 hypothesised that if schools were assessed more on the emotional wellbeing of CYP rather than their academic outcomes, EPs would be utilised more for MH and wellbeing work.

‘I think if it becomes a criteria of Ofsted or something then schools would definitely take it on board more and might request training from us more at cluster level. I think it would need to become something they’re judged on because unfortunately that is what will always take priority. It’s not ideal. You want them to want to do it but the reality is they will always prioritise what they’ll be judged on.’

(Participant 3 lines 352-357)

4.2.1.3.2 Subtheme 3.2: Time limitations

'I have deadlines after deadlines and if I don't have deadlines I have consultations.'

(Participant 4 lines 283-284)

Linked to the impact of government on EPs working in local authorities, all of the EPs interviewed spoke about limitations to their time impinging on their capacity to focus on the wellbeing within their schools.

'The way we've got lots of tribunals your time is so scarce to be able to negotiate and contract that kind of work because it doesn't happen really quickly. You've got to have the conversations. You've got to gain people's trust, they've got to believe you would be really helpful. You've got to go through all the practical arrangements of setting it up; how are we going to do it? what's it going to look like? how much time are we going to need? who's going to be involved? All of that and then you've actually got to deliver it and you know kind of evaluate it afterwards and it takes a long time and I think it's time and we feel at the moment and I sense it in the team that anything like that we haven't got time to do because we are so busy doing all of these other demands so I think that's one of the biggest barriers.'

(Participant 2 lines 393-404)

Participant 1, however, proposed that EPs could still work in the field of MH and wellbeing despite the barriers.

'I think some of the barriers are around capacity, workload, time but those barriers have always been there, will always be there that I think it's about how we manage those. I don't think they are barriers that should stop us doing that but we have to be realistic and we can't do everything for everyone.'

(Participant 1 lines 307-311)

4.2.1.3.3 Subtheme 3.3: Retention of EPs

The EP service where this research took place had several vacancies across the different teams. The recruitment and retention of EPs is, therefore, essential to the service and relevant to the scope of what they can offer to schools. From the EP interviews there appeared to be a paradoxical situation; when capacity is reduced, the opportunities for EPs to engage in a full variety of activities including MH and wellbeing work is also reduced thus leading to more EPs moving into private practice or services outside the LA.

'We've got lots of independent EPs working in our area. I've got one who is a good friend. She used to work here and now she works independently and she is doing that kind of work and schools are commissioning her to do it and that's great and I'm really pleased for her but it's the sort of think I'd like to be doing as well but because of the constraints of time and the amount of statutory work we have to do.'

(Participant 2 lines 387-392)

'I love the job but I always think outside the box. So currently newly qualified, educational psychologist working for the Local authority part-time with the view of acquiring experience which will allow me to move on to private practice.'

(Participant 4 lines 80-82)

Participant 3 reflected on the possible difference between EPs who are more recently qualified and those who have been practicing for a long time;

'I think the people who stay are maybe those who've done it for a long time. It's convenient for them, they've got families here or their kids have grown up and they are very much stuck in a way of doing things that hasn't maybe addressed these things in the past and the emotional wellbeing side.'

(Participant 3 lines 348-352)

4.2.1.3.4 Subtheme 3.4: Service Delivery

The researcher understands that the EP service where this research took place adopted a consultation model of service delivery; the EPs interviewed had differing views about how this impacted on their ability to engage in MH and wellbeing support in schools. Participant 1 felt that the consultation model enabled a greater focus on MH and wellbeing.

'I think with the consultation model as it stands I feel we are probably getting more discussion around mental health because maybe the historic view of psychologists coming in and doing that individual work has shifted because of the model so therefore we're getting really to the nitty gritty cases where we can actually talk about things and make a difference.'

(Participant 1 lines 287-291)

However, she acknowledged that schools may not share this view.

'And it's how the school see that because I wonder whether schools might see that we could be more effective in terms of emotional wellbeing if we're working directly with a child but actually I would argue that the psychology is probably the best in the consultation model because then you are working with the adults who are dealing with the problems on a day to day basis with those issues. That is just my view.'

(Participant 1 lines 296-301)

Participants 2 and 3 reflected on how the model of service delivery could limit the types of work that they were able to do.

'I might have met him and worked with him a little bit more but because of the way our service is at the moment I haven't felt like that has been something I could offer.'

(Participant 2 lines 225-227)

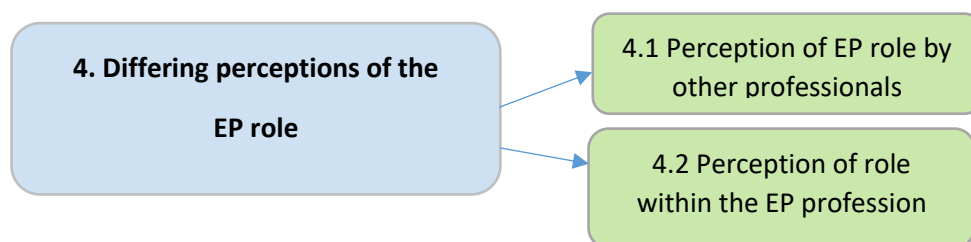
'I know a lot of my schools ask about whether we can do things like CBT and work with anxiety but it's quite hard in the current system that (named county) has to offer anything other than an EP consultation.'

(Participant 3 lines 52-55)

4.2.2 Overarching theme 2: EP role in supporting MH and wellbeing in schools

4.2.2.1 Theme 4: Differing perceptions of the EP role

This theme was dominant in all of the EP interviews and is relevant to the positioning of the EP role, particularly in relation to MH and psychological wellbeing. The analysis revealed that the understanding of the EP role was not universally agreed by either those outside the profession or within. This theme therefore has a strong link with theme 3; challenges to EPs working in the field of MH and psychological wellbeing. It was identified as an independent theme rather than a subtheme of the above due to the prevalence of the codes comprising it. It was also identified as being more relevant to the second overarching theme.



4.2.2.1.1 Subtheme 4.1: Perception of EP role by other professionals

All of the EPs interviewed agreed that other professionals did not usually associate EPs with MH and psychological wellbeing support.

'The other barrier is the perception of our role which kind of ties into that. The perception that perhaps we don't do that kind of work.'

(Participant 1 lines 323-325)

'I think some SENCOs wouldn't think of us at all actually with mental health.'

(Participant 2 lines 178-179)

Participant 2 suggested that school staff 'pigeon hole us in a kind of particular role' (line 425). This view concurred with Participant 4 who expressed her perception that SENCOs continue to hold the expectation that the EP function is to focus on the assessment of individual pupils.

'So why am I going to go to an EP to say about mental health when they are not actually coming to do what I consider to be the bread and butter of their work. They're coming to do the cognitive assessments and the direct work, what can he add to that?'

(Participant 4 lines 149-153)

Despite this perception of SENCOs' views, Participant 3 shared her understanding that SENCOs would value EPs input in relation to MH and wellbeing in schools.

'I think some of them see us very much as just doing cognitive assessments or maybe giving some advice or some consultation but I think they would like us to do more (wellbeing work).'

(Participant 3 lines 50-52)

Participant 1 spoke about how EPs have begun to address this;

'In some schools where we have already been involved in terms of mental health and wellbeing obviously they will obviously associate us with doing that kind of work'

(Participant 1 lines 89-91)

4.2.2.1.2 Subtheme 4.2: Perception of EP role within the EP profession

'as EPs are also individuals and we all do work slightly differently so I think one EP may well want to develop the role to be more about mental health but another EP may not and I think we have to be respectful and mindful of that'

(Participant 1 lines 358-360)

The data analysis suggested strongly that within the EP profession there are differing views of what their role is and whether MH and wellbeing comprises a minor or major part of it. Participant 4 expressed that this may be due in part to confidence and skills (see subtheme 1.2). Participant 2 acknowledged that the difference could be partially due to preference;

'I do think some people in our role quite like that. Some people don't want to'

(Participant 2 lines 128-129)

Participant 3 made links to the time limitations (subtheme 3.2) and pressure of statutory duties (subtheme 3.1) when considering the differing constructs of the EP role.

'I think other EPs might not just because of time pressures or because they don't feel that's their role. I personally think it is.'

(Participant 3 lines 262-264)

The perceived movement of the EP profession towards including more MH and wellbeing functions in their role was reflected on by Participant 1.

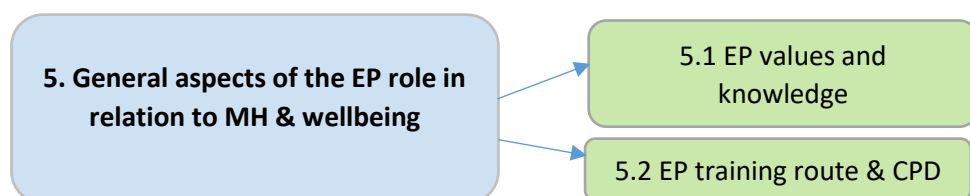
'what I think is really interesting about the profession I think that is really shifting. I think over the last probably five or six years I've seen it myself where there's that real shift in kind of opening what we do up to the emotional health and wellbeing bit and the other bits all tie in but really having that underpinning. Well I've seen that anyway.'

(Participant 1 lines 327-341)

It could be argued that this perceived shift is linked to the change in training pathway for EPs since the first cohort of doctoral EPs qualified in September 2009. This subtheme, therefore, links to the subtheme 5.2 (EP training route and CPD).

4.2.2.2 Theme 5: General aspects of the EP role in relation to MH and psychological wellbeing

The EP interviews highlighted shared values, knowledge and generalisable skills within the profession. This theme reflects these aspects of the EP role.



4.2.2.2.1 Subtheme 5.1: EP values and knowledge

Enjoyment of and value for MH and wellbeing aspects of the EP role was a strong theme emerged.

'So I've always been focussed on social and emotional kind of skills and development but I would say a very high value because actually I don't think we can do anything else well unless the schools are emotionally healthy.'

(Participant 1 lines 79-82)

'I see it as probably integral to my role alongside all the statutory work we're required to do.'

(Participant 4 lines 131-132)

Despite barriers expressed, the data also supported the argument that EPs believe they are well placed to support MH and wellbeing in schools due to their specialist knowledge.

'We've got the latest research. We know the importance and the impact that mental health has on children's academic performance and on their emotional wellbeing.'

(Participant 3 lines 46-48)

'I think obviously due to the psychological knowledge that we have we should be professionals who are involved in emotional health and wellbeing'

(Participant 1 lines 67-69)

'our knowledge of children and developmentally, so knowledge kind of individuals but also of the systems around those individuals means we are well placed to have a really good impact.'

(Participant 1 lines 69-72)

Participant 1 explained how a consideration of wellbeing was intrinsic to all of her work, even when a MH or wellbeing focus was not explicit.

'I suppose in a way it's always in a thread of my work so I don't think I can specifically say apart from the CBT case but all the questions that I am asking, all the discussions I have that is always there so I am trying to draw out is this child feeling settled? or are they feeling worried? so that's always in my line of questions.'

(Participant 1 lines 155-159)

4.2.2.2.2 Subtheme 5.2: EP training route and CPD

The EP interviews highlighted the impact of the doctoral training route for EPs, and the focus of MH and psychological wellbeing on the courses.

'as a profession I think it's happening quite naturally and obviously I don't know as well as you will do in terms of the training and the focus from the university's point of view but I assume that is much more of a priority now.'

(Participant 1 lines 361-363)

The universities' expectations, in terms of placement activities that trainees need to fulfil, have influenced the scope of EP functions experienced within the service.

'I think it's because that is so much part of our training. I don't know about on your course but we did loads of CBT and the VIG and it's like I said we know the research and the relevance and the importance.'

(Participant 3 lines 59-61)

'I suppose it's interesting that I'm picking an example from a trainee EP because I guess she had the time and almost the directive to do it as well whereas I wonder for other EPs would they be able to negotiate that time in a school.'

(Participant 2 lines 250-253)

Due to the teaching of specific therapeutic skills within the doctoral training, the courses expectation to facilitate wellbeing interventions on placement, and the research element of the qualification, there can often be a tension between espoused practice and practice in the real world.

'there is a reality shift when you are working and things become more difficult in the sense of both doing more longer term projects if you like but I do still think there is a place for them and I think we need to be really careful to protect that time'

Participant 1 (lines 373-376)

Two of the EPs spoke about how EPs would need ongoing training when working in the field of MH and wellbeing in schools.

'I guess associated to that is ongoing training. Where would we access that? Perhaps there'd probably be a lot; there might be courses that you could access independently and maybe request that they are funded by the service but as a matter of course I think we're not looking into upskilling our own staff at the moment around running this sort of intervention because we're so distracted with other things.'

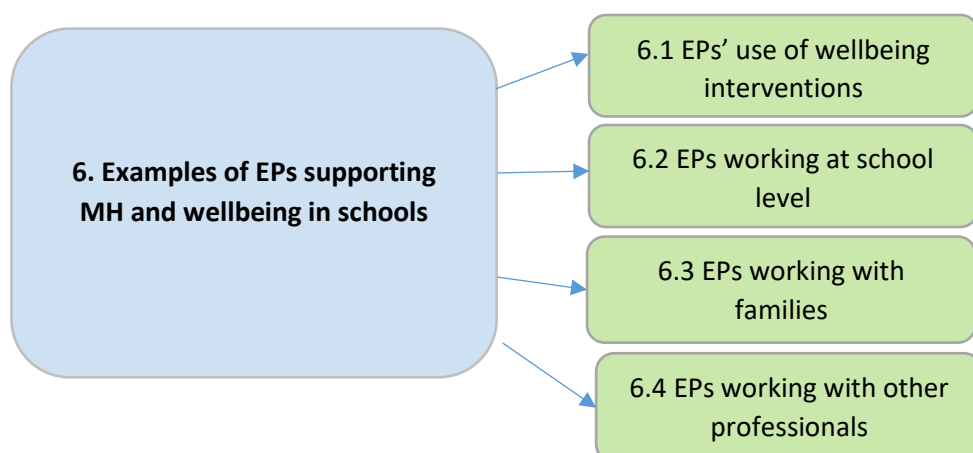
(Participant 2 lines 411-416)

'I think something like that on a CPD day getting her (Sue Roffey) to come in and deliver training so we can train schools in how to do it. That would be really useful for CPD days.'

(Participant 3 lines 422-424)

4.2.2.3 Theme 6: Examples of EPs supporting MH and psychological wellbeing in schools

This theme describes the EP participants' experiences of EPs supporting MH and psychological wellbeing in schools in a variety of different ways.



4.2.2.3.1 Subtheme 6.1: EPs' use of wellbeing interventions

The EPs interviewed shared experiences of wellbeing interventions facilitated by themselves or their EP colleagues. The interventions used a variety of different psychological principles and approaches such as CBT, mindfulness and personal construct psychology (PCP).

'I did some CBT work with a year 9 pupil and that was around anxiety and attendance so that was quite a longer piece of work than I would normally do. We did CBT with him and then on top of that we did CBT approaches type training with his key workers and so myself and a colleague did that in a secondary school.'

(Participant 1 lines 151-154)

'I did some CBT that was part of our course requirement so I did about eight sessions I think of CBT for pupils, a school refuser, one anxious...'

'it was a lot of psycho-education; the links between the thoughts, the feelings, physiological feelings and behaviours and trying to show the cycle and change one aspect and see what happens and sort of talking about trapping negative thoughts'

(Participant 3 lines 103-104 and 138-142)

'one of the trainee people I supervised last year she ran a mindfulness group as part of her training requirements that has had to run a group intervention and she had got a class in one of her schools where there were a number of concerns about YP not that any of them had mental health difficulties but that perhaps they were vulnerable children...'

'It was really lovely and the children; they were all boys; and she had created such a lovely kind of comfortable group for them and they were all working on these strategies to kind of lower their worries and turning your worry knob down'

(Participant 2 lines 232-237 and 243-246)

Participants 2, 3 and 4 spoke about the importance of evaluation and follow up after implementing interventions. Participant 3 also spoke about the benefit of involving school staff in the intervention she described.

'I was able to do about six sessions of doing some personal construct psychology just sort of eliciting her construct and trying to sort of get really how she is seeing things and understand that which then meant we could give the teachers some strategies.'

(Participant 3 lines 86-89)

4.2.2.3.2 Subtheme 6.2: EPs working at school level

This subtheme links to theme 2 (school values and ethos) but refers specifically to how EPs have worked with the systems in schools to support the wellbeing of both CYP and staff.

'So our role not only in raising awareness but I suppose challenging the schools to what the culture is like around mental health and wellbeing.'

(Participant 4 lines 112-114)

Participants 1, 2 and 3 described how they set up opportunities for school staff to have peer supervision, which had a positive impact on their wellbeing.

'a previous colleague and I worked with a special school and we did some work discussion groups and that was really focussed around the... well it started off being focussed on the emotional wellbeing of the students in a special school but it evolved within six sessions that it was actually about their mental health.'

'That was a really powerful piece of work actually.'

(Participant 1 lines 250-254 and 256)

'I'm currently doing some Solution Circle work with clusters. So I've got two clusters and we're running every half term.'

'And in a way it evolved as supervision like peer supervision and when we left they carried on with it.'

(Participant 3 lines 156-157 and 268-269)

Participant 2 spoke of a group that was set up by EPs to give head teachers opportunities for peer supervision.

'I think just giving them that opportunity to share how they gained support and how they might be able to support each other was really powerful and they said I remember in the primary heads group we've never had the opportunity to have anything like this before and they were very kind of very grateful for us reaching out to them in a way.'

(Participant 2 lines 349-353)

The EPs interviewed also spoke about training related to MH and psychological wellbeing that they have provided in schools.

'We did a bit on nurture group training and everything about nurture is about looking after yourselves and then you can look after the children. All of that is such a big plug at the moment and I think is really relevant actually.'

(Participant 1 lines 344-347)

'I've done self-harming training a few years ago where a secondary school had a number of pupils in year 9 who were all self-harming and they were really concerned about that so did some training and it was helpful I think because they had identified that as a need.'

(Participant 2 lines 148-151)

4.2.2.3.3 Subtheme 6.3: EPs working with families

Two of the EPs spoke about their work with CYP who had experienced traumatic early life experiences and the impact of family dynamics on the MH of CYP. Participant 2 suggested that some professionals may find this difficult to manage;

'sometimes the history of some of the children we work with is really unpleasant and I wonder sometimes whether it's too difficult to talk about and it's too difficult to engage with'

(Participant 2 lines 302-304)

Participant 3 spoke about doing some direct work with a girl who suffered from anxiety and in doing so realised that most of the anxiety was stemming from the girl's mother. This led to some CBT-based work with the girl's mother which was evaluated using a TME approach.

'I did a lot of work with mum in the end rather than the girl'

(Participant 3 line 109)

'we had a checklist that we had to use; some sort of rating scale so I think it was based on a kind of TME approach if that makes sense. I think TME was one of the ones we used where the parent would set what they would be happy with and I think they'd put they'd be over the moon to get to a 5 out of 10 if she would get in the car and go to a shop and she was by the end just going everywhere.'

'They were very happy with us'

(Participant 3 lines 116-121 and 123)

4.2.2.3.4 Subtheme 6.4: EPs working with other professionals in the field of MH and wellbeing

Participant 3 reported that she had worked at lot with CAMHS (line 368) but added that they do not focus on schools. Participant 1 spoke about her involvement with a CAMHS project which aimed to pilot CAMHS practitioners facilitating EP-style consultations in schools.

'I also think and you might or may not agree that we have that role, that we could do some of that work together. I've certainly picked up a lot of what I would call emotional health issues and I think we could be doing those jointly with consultations with CAMHS.'

(Participant 1 lines 113-117)

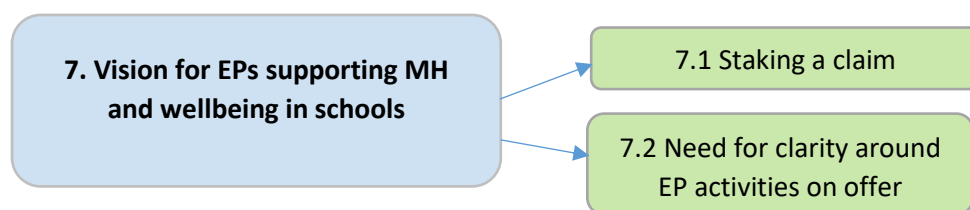
Participants 1 and 2 spoke about their experiences of working in multi-disciplinary teams, prior to local authority re-structuring, to support the wellbeing of CYP who were at risk of exclusion.

'So each area of (named county) had a main EP team and they all had a BST (behaviour support team) and that was a kind of multi-disciplinary team which was made up of an EP, a CAMHS practitioner, so a primary mental health worker and they were seconded from CAMHS to work with us in the team. There was a family support worker and there was an advisory teacher and each of those teams had a manager.'

(Participant 2 lines 14-19)

4.2.2.4 Theme 7: Vision for EPs supporting MH and wellbeing in schools

This theme reflects the wish expressed by all four of the EPs interviewed to work in the field of MH and wellbeing. Several suggestions were made about how the profession could follow this agenda in the future.



4.2.2.4.1 Subtheme 7.1: Staking a claim

'we've got to stake a claim in it really and saying actually in my schools this is a real need at the moment so I feel it's very important for me to address that.'

(Participant 2 lines 428-429)

Participant 1 spoke about the possible risks faced by the profession if EPs do not effectively stake a claim to working in the field of MH and wellbeing;

'if you don't actively claim that part of that role you do become separated from it'

(Participant 1 lines 127-128)

The EP participants suggested that EPs should make it clear to schools the scope of the activities that they can offer and the training that they have, which links to subtheme 7.2 below.

'I think there will come a time where we have to say...like the people who are VIG trained... we can offer this. We've got members of staff who are trained.'

(Participant 2 lines 450-452)

It was also suggested that MH and psychological wellbeing in schools should be a focus for the yearly contact conversations between SENCOs and their link EPs, where priorities for the year ahead are discussed.

'actually I think that should come into our conversation form as a question... to sort of asking something around staff morale, staff wellbeing.'

(Participant 3 lines 274-275)

Participant 2 expressed that *'a service or a team position on* (the EP role in supporting MH and wellbeing) *would be helpful'* (lines 485-486) alongside a sharing of skills across the service.

'I think there just being some kind of strategic overview about how the skilled people we have got in the service how we can all access them or how they can support us to develop the power and skills so again I'm thinking of the VIG people here.'

(Participant 2 lines 507-510)

4.2.2.4.2 Subtheme 7.2: Need for clarity around EP activities on offer

The EPs' interviews revealed a perceived need for a clear message both within the service and communicated to the service users about what activities EPs can offer in relation to supporting MH and wellbeing in schools.

'we all just go out in our individual little ways and do our own individual work and I sometimes think there is no sense of us as a service this is what we're offering and I guess that is a barrier and an idea'

(Participant 2 lines 459-461)

Participant 3 spoke about the different training that EPs offer in relation to wellbeing in schools and how an agreed approach, throughout the whole EP service, would be beneficial.

'having some sort of training package that we agree as a service. I think the problem in (named county) is we all make our own training and go and do it but actually what is the message (named county) want us to be giving to schools. It just feels very chaotic how we then do the training so having an agreed approach in a way and I know we can be flexible within that then if there are some key messages which need to come across then tweaking it for what your particular school or clusters need. I think that would be a way forward.'

(Participant 3 458-465)

Throughout theme 6 (Examples of EPs supporting MH and wellbeing in schools) and in subtheme 7.1 (Staking a claim), the EPs inferred that a widening of services on offer would facilitate them working in the field of MH and wellbeing. Participant 1 expressed some caution however, about EPs stretching themselves too thinly by offering too many services.

'I think there's a lot more we could be doing but I think what we need to be careful of is saying this is what we can do and then offering it rather than finding the balance between this is what we can do, what do you need? It needs to be both ways because until the schools know that we can offer something around mental health.'

(Participant 1 lines 279-283)

The EP interviews also revealed a need for clarity around what is being offered by way of MH and wellbeing support to school by different services. This links with the above subthemes 2.3 (Other services offering MH and wellbeing support) and subtheme 4.1 (Perception of EP role by other professionals).

'One (barrier) is around perhaps the lack of clarity between services. There are so many teams and services out there and I'm thinking kind of (county name) specific probably where perhaps there isn't clarity for schools and each other about where our role is in mental health and it is so high in terms of government agenda that everybody is promoting but actually what does this service do and how can we work together? I think that is probably a barrier. It's a bit messy that's fair to say.'

(Participant 1 lines 312-318)

In summary, the analysis of the EP interviews suggests that EPs understand the links between wellbeing and achievement and value the importance of adopting a systemic approach which considers the impact of environmental factors on wellbeing. The EPs wish to support the MH and wellbeing of both CYP and school staff and view it as part of their role. However, they are aware of the barriers to engaging in this type of work, which have wide-reaching implications for practice. The EPs gave examples of MH and wellbeing support that they have given to schools at an individual, group and whole school level. The EPs described a focus on emotional wellbeing that was threaded through all their duties, however they acknowledged that this is not always recognised or understood by other professionals or service users. With an orientation to

solutions, the EPs were able to suggest ways in which the service specifically, and profession more generally, could increase their support of MH and wellbeing in schools.

4.3 SENCOs views of the EP role in supporting MH and psychological wellbeing in schools

Two overarching themes were identified: Important contextual factors relevant to MH and psychological wellbeing in schools and; SENCO views of the EP role in supporting MH and psychological wellbeing in schools. Organised under the first overarching theme, there are three themes:

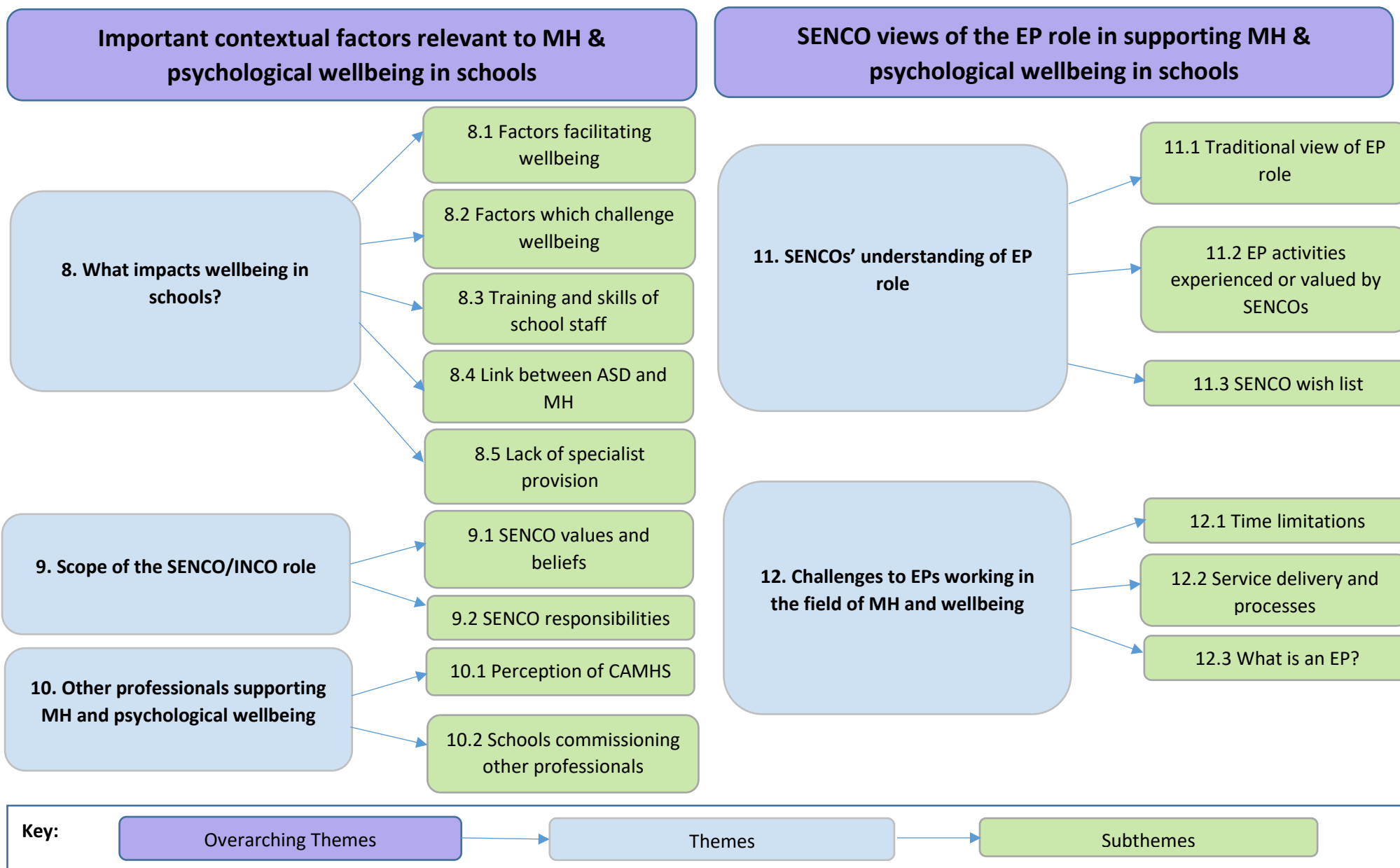
8. What impacts wellbeing in schools?;
9. Scope of the SENCO/INCO role;
10. Other professionals supporting MH and wellbeing.

Under the second overarching theme there are two themes:

11. SENCOs' understanding of the EP role;
12. Challenges to EPs working in the field of MH and wellbeing.

Within each theme, several subthemes were identified as seen in figure 3.

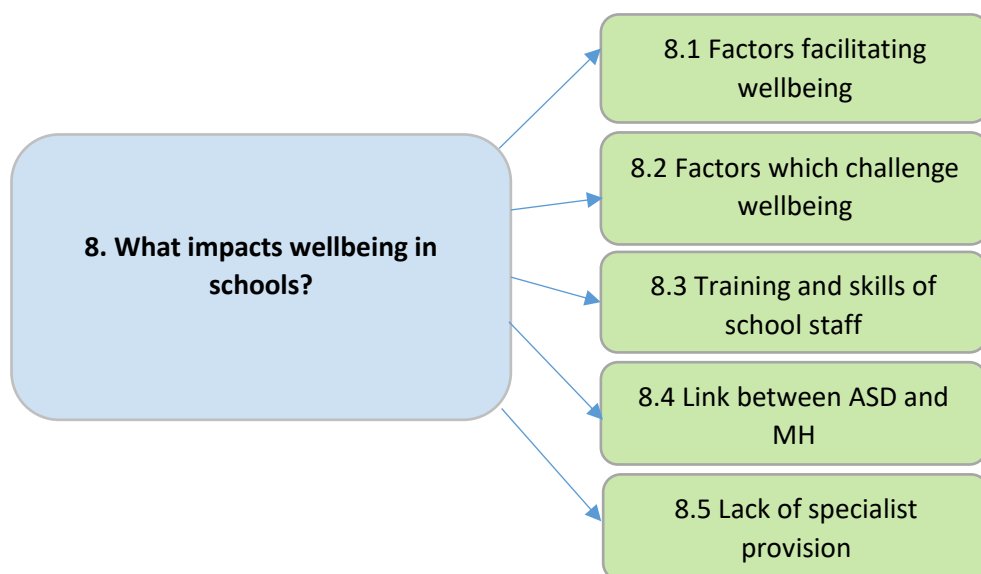
Figure 3: Thematic map depicting SENCOs' views of the EP role in supporting MH and psychological wellbeing in schools



4.3.1 Overarching theme 1: Important contextual factors relevant to MH and psychological wellbeing in schools.

4.3.1.1 Theme 8: What impacts wellbeing in schools?

This theme was prominent in all the SENCO interviews and is representative of the complex nature of overall wellbeing in schools. This theme is akin with theme 2 (school values and ethos) identified in the TA of the EP interviews.



4.3.1.1.1. Subtheme 8.1: Factors facilitating wellbeing

The SENCOs spoke about many different factors that aim to improve the wellbeing of CYP and staff in their schools. Co-researcher 1 identified the impact of the head teacher on the rest of the school.

'I think if a head shows through their actions that they really care about the wellbeing of staff then I think it would cascade down to the staff's attitude towards those young people'

(Co-researcher 1 lines 274-276)

Co-researcher 2 reflected on specific interventions that had been put in place in the school to improve wellbeing.

'We've done mindfulness here. Staff had some mindfulness sessions.'

(Co-researcher 2 lines 311-312)

'I think people are generally happy. We try little sort of .. we do 'fuddles' which is nice so Friday cuddle. We do like secret friends. I did the secret friend last term for two weeks so the idea is not to spend money but you have a secret friend and you're supposed to make them feel good about themselves.'

(Co-researcher 2 lines 399-402)

One intervention that co-researcher 2 spoke at length about was a lunchtime club focused on the wellbeing of vulnerable CYP, run by the year six pupil representatives. The club took place every day in the hall with construction toys and craft activities for any pupils who struggled on the playground. She also spoke about the school having a 'Feel Good' week.

'we've got feel good week coming up and I've photocopied some of Jenny Mosley's playground games and I've asked each class to teach (them).'

(Co-researcher 2 lines 446-447)

Co-researcher 3 described how the pastoral system in their school supported the MH and wellbeing of CYP who do not have any acknowledged special educational needs.

'We have a very tight pastoral system where it's the heads of house who hold those sort of details about kids that don't have special needs.'

(Co-researcher 3 lines 80-82)

A wellbeing committee in co-researcher 3's school was set up with the specific aim of improving the wellbeing of staff.

'they get together and they discuss things that might make us happy. I don't know they tried, they advertised some sort of drink outside of school just before Christmas and they're wanting to do a trip to the theatre and things like that.'

(Co-researcher 3 lines 158-161)

4.3.1.1.2 Subtheme 8.2: Factors which challenge wellbeing

This subtheme was prominent in all the SENCO interviews. Some factors were identified which challenged wellbeing in schools: the values of the head teacher; teachers' workloads; an increase in CYP with MH difficulties; school staff's lack of confidence in supporting CYP with MH difficulties; an ethos which does not encourage sharing or talking about difficulties; and the government focus on measuring outcomes.

As well as being identified as a factor facilitating wellbeing in schools, co-researchers 1 and 2 expressed the need for head teachers to focus more on staff wellbeing and model a healthy work-life balance.

'a lot of heads talk about wellbeing but they have to put their money where their mouth is'

(Co-researcher 1 lines 351-352)

The workload of teachers and perceived lack of recognition was discussed by the SENCOs in terms of having a negative impact on staff wellbeing but also on recruitment and retention of teaching staff.

'staff who are teaching all day actually and here they're supervising students at break time and at lunchtime and there's not a lot of downtime at all even to go to the toilet.'

(Co-researcher 1 lines 354-356)

'it's more more more more more more more and then it's explosion and I think we lose a lot of really highly trained and highly motivated passionate people from our industry because there is not enough about work around mental health.'

(Co-researcher 2 lines 300-303)

'but staff retention is really challenging so if you can hold on to your staff, your good teachers you look after them it's better for the children isn't it?'

(Co-researcher 2 lines 390-391)

'I think people forget to say well done and thank you and that was great and you've done a good job and I think that gets missed. To be honest with you being taken for granted.'

(Co-researcher 3 lines 172-175)

Co-researchers 1 and 2 spoke about staff feeling the need to mask any feelings of worry or stress at work and co-researcher 3 reflected on feeling overwhelmed at work.

'staff mask things really well and that's actually part of the acting in school. If you've got a sick child at home or your pet's really ill and you need to get it to the vets whatever is going on you don't mention it in school because you just have to put on a front'

(Co-researcher 1 lines 292-296)

'We're in a job where it doesn't matter how you feel you have to have a big smile'

(Co-researcher 2 lines 310-311)

'At a point last term not necessarily all to do with the kids but school in general I guess the change and I had to get out of here and there was nowhere I could go. Physically there was nowhere I could go because there are very few rooms free and I didn't feel that there was anybody completely neutral that I wanted to unload on and physically there was nowhere for me to go and hide.'

(Co-researcher 3 lines 201-205)

Co-researcher 2 reflected on the tension between the current focus on measuring impact in schools and considering the emotional wellbeing of CYP.

'I feel like I'm a little bit swamped by what is the impact so what is the impact and how do we measure it because when you're measuring somebody's emotional state it's a lot harder than measuring somebody's mathematical ability you know.'

(Co-researcher 2 lines 233-235)

4.3.1.1.3. Subtheme 8.3: Training and skills of school staff

This subtheme was added retrospectively after the working party, as suggested by the SENCOs. The codes for this subtheme were initially organised under the subtheme 1.2 (factors which challenge wellbeing in schools). The SENCOs spoke about the perceived increase in CYP with MH difficulties and the resulting lack of confidence that staff feel in dealing with these difficulties.

'there is definitely an increase of children with mental health issues.'

(Co-researcher 3 lines 57-58)

'Sometimes as teachers as well you feel in a bit of a vulnerable place in terms of what you say, in terms of coaching and things like that with dealing specifically one to one with children'

'One of the things adults really are scared of doing in schools is making it worse or saying something that could have a profound effect'

(Co-researcher 2 lines 196-198 and 202-204)

'Things aren't made clear what you should be and shouldn't be doing etc. etc. and also there is a lot of pressure from our department side with regards to dealing with the emotional issues of kids it can be quite exhausting.'

(Co-researcher 3 lines 175-179)

4.3.1.1.4 Subtheme 8.4: Link between ASD and MH

Co-researchers 1 and 3 spoke about the link between autism spectrum disorder (ASD) and MH difficulties in their schools; in particular anxiety.

'we've been trying to say to the staff that if a boy does this a) for anxiety. That is the watchword; a for anxiety. Actually a is for autism but if you don't remember any of the other training just remember a for anxiety because treat it as if they're being anxious. They're not being deliberately difficult.'

(Co-researcher 1 lines 561-565)

‘You get a typical child with ASD for example and it can create a huge amount of anxiety especially in a school this big. They need support.’

(Co-researcher 3 lines 60-62)

4.3.1.1.5 Subtheme 8.5: Lack of specialist provision

Two of the SENCOs expressed an inability of their schools to meet in full the significant needs of some CYP. However, due to a perceived lack of specialist provision within the county, the CYP had to remain on role.

‘we’ve got a child who is emotionally all over the place and we’re getting it more with the lack of autistic provision within county because we’re getting more and more and more students with autistic conditions identified.’

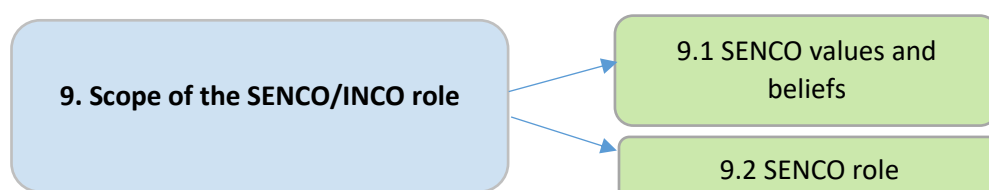
(Co-researcher 1 lines 503-505)

‘we’ve got a couple of cases of kids who really really really shouldn’t be here because they are struggling so much but we don’t have the resources out there to be able to move them on.’

(Co-researcher 3 lines 64-66)

4.3.1.2 Theme 9: Scope of the SENCO/INCO role

This theme reflects all the SENCO co-researcher’s understanding of the SENCO role and their shared beliefs around the importance of focusing on emotional wellbeing of CYP, particularly those with SEN.



4.3.1.2.1 Subtheme 9.1: SENCO values and beliefs

Two of the three SENCOs interviewed expressed their interest in MH and psychological wellbeing and spoke about how they relate their values to their role.

‘as educators we need to make sure that the students are in a place where they can learn and if they’ve got too much going on in their heads they’re not going to be able to concentrate and I’ve always been fascinated by mental health personally’

‘That has always been my keenest interest; emotional health and wellbeing and getting to know the students and their families really well. I think that’s why I went into becoming a SENCO from teaching’

(Co-researcher 1 lines 22-25 and 29-32)

‘I’m on a wellbeing and resilience course; effective confrontation course at (LA). It was brilliant. I think that somebody has to help with wellbeing for staff’

(Co-researcher 2 lines 298-299)

Although co-researcher 3 reported that the role of SENCO was not her chosen career path, she did express views akin to positive psychology;

‘Things always get better no matter how bad they seem. I’m a great believer in that.’

(Co-researcher 3 lines 217-218)

4.3.1.2.2 Subtheme 9.2: SENCO role

This subtheme around the responsibilities of the SENCOs, particularly in relation to wellbeing within the schools, was prominent in all of the interviews. Co-researcher 1 discussed her role in supervising other staff both formally and informally.

‘I would be like their supervisor in the school or they might say I think I need to talk to you about this person’

(Co-researcher 1 lines 443-445)

‘they’ve said, “can I just come and speak to you” they’ve got wound up about something and then they just get a bit of time and I always have a kettle in my room wherever I’ve been.’

(Co-researcher 1 lines 389-392)

Co-researcher 2 spoke about the scope of her role as INCO;

‘actually inclusion leader which makes the role much bigger because it means it covers everything sort of health, medical, racism, EAL, all those vulnerable groups, pupil premium.’

‘so I see my role a little bit of trying to work ... I’ve got behaviour as my role and inclusion’

(Co-researcher 2 lines 153-155 and 429)

Being new to the INCO/SENCO role, co-researcher 2 expressed her difficulty in managing the role expectations of others and reported that she would have valued more help to understand the different roles of other professionals.

‘in July I was a class teacher and in September I was a SENCO and suddenly everyone expects you to have this amazing understanding of what physiotherapy is or occupational therapy or educational psychology or you know and you can only really take from the title I suppose and the interpretation of what that is and research.’

(Co-researcher 2 lines 109-113)

‘Quite a lot of people came away from the SENCO training. It was very good and very insightful about lots of things but nobody talks about the different roles of support and the advisory services and what they all do’

(Co-researcher 2 lines 132-134)

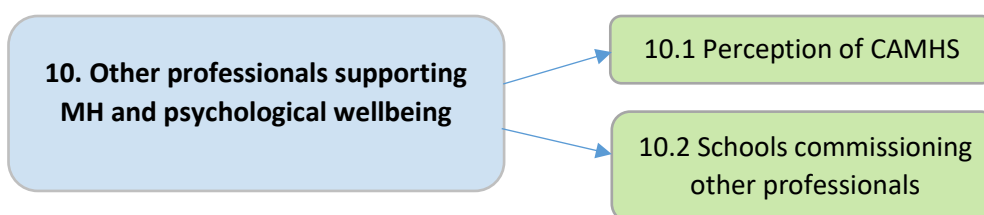
Co-researcher 1 reflected on her role in supporting parents;

‘I always look after parents and I treat them how I would expect to be treated myself ... there’s a big emotional investment in listening to these stories.’

(Co-researcher 1 lines 616-618)

4.3.1.3 Theme 10: Other professionals supporting MH and psychological wellbeing

This theme identified the other services that SENCOs request advice and support from when working with CYP who have MH difficulties.



One of the SENCOs interviews expressed positive perceptions of CAMHS and how they value their support. Co-researcher 1 explained that if a CYP had MH difficulties, CAMHS would be their first consideration for outside support.

'CAMHS would be the ones who dealt with the mental health side of things if I'm perfectly honest'

(Co-researcher 1 lines 88-89)

'Some CAMHS are very good at giving us reports.'

'their reports are very detailed, not overdetailed. They are just the right length not pages and pages. It's about a side and a half and that's optimal really because you get the salient points without having to go through pages and pages.'

(Co-researcher 1 lines 113 and 119-121)

Co-researchers 1 and 3 spoke of the difficulties they had experienced in accessing support for their CYP from CAMHS. Difficulties highlighted include CAMHS being understaffed, CYP not engaging with the services offered and support only offered to the most serious MH difficulties.

'I think now that CAMHS is struggling which we've known for a long while but it's obviously more in the news now about them being understaffed a lot of parents will say to us, I ask if CAMHS are involved and they will say they're useless or a waste of time, I'm quoting them; "we went once and I couldn't understand what they were doing" or "it didn't make any difference" or "he doesn't want to go"'

(Co-researcher 1 lines 94-99)

'but that in a way sometimes left the child or young person quite exposed because the CAMHS appointments may not have been that frequent or maybe they won't going to them very frequently or maybe subsequently we would get the letter which said this family have missed two appointments they're now removed from our list or they won't engage. That's the phrase that really annoys me where CAMHS say but they're not willing to engage and you think where does that leave us as the school?'

(Co-researcher 1 lines 476-482)

'The experiences I've had with CAMHS and even through the parents have not been ... nobody seems to get where they want to get with them and everybody's aware that they've been told over the phone we're understaffed. It's not very helpful when you've got a child you're concerned is going to kill themselves.'

(Co-researcher 3 lines 486-490)

All three of the SENCOs interviewed spoke about their schools employing their own staff specifically to work with CYP with MH difficulties.

‘as far as CBT goes we tend to employ our own counsellors. Most schools I’ve worked in have had their own rather than going through the (named county) Service or there used to be a service that you could buy into but I think they like to have a bit more control over who they get and that person being a committed member of their own staff’

(Co-researcher 1 lines 435-439)

‘sometimes we can get them a counsellor and get them support and other times we are left trying to do it ourselves I guess and that’s not always an ideal scenario.’

(Co-researcher 3 lines 55-57)

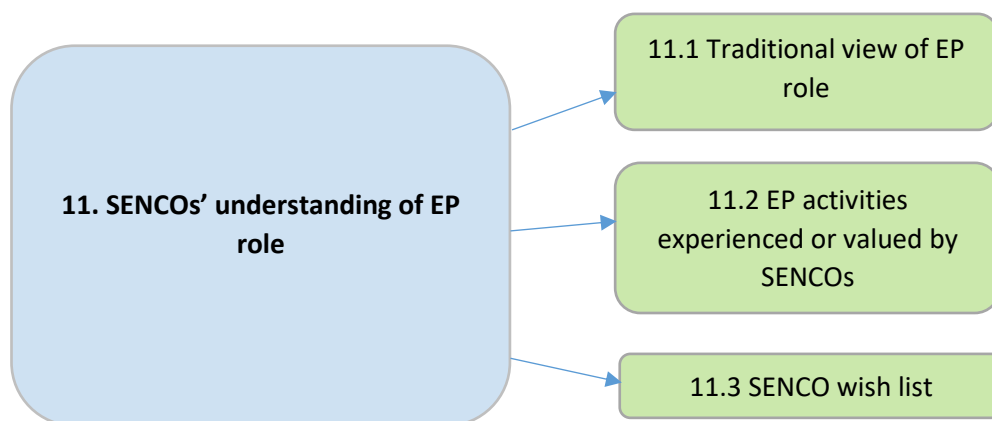
‘we have a play therapist who works on site so she quite often offers attachment and trauma work as well’

(Co-researcher 2 lines 291-292)

4.3.2 Overarching theme 2: SENCO views of the EP role in supporting MH and psychological wellbeing in schools

4.3.2.1 Theme 11: SENCOs’ understanding of the EP role

Theme 11 reflects the SENCOs’ perception of the EP role and the types of support they have experienced from their EPs, specifically in relation to MH and psychological wellbeing. The TA of the SENCO interviews also revealed what they would like from the EP service in the future.



4.3.2.1.1 Subtheme 11.1: Traditional view of the EP role

All the SENCOs interviewed expressed that they currently or had previously viewed the EP role as being mainly focused on individual assessment, particularly in relation to cognitive assessment. The interviews also revealed a perception that EPs are gatekeepers to additional funding or support.

‘seeing Ed Psychs as a bit of conduit to something else and I think that’s probably how I’ve viewed it to be perfectly honest’

(Co-researcher 1 lines 78-80)

‘I need to get the Ed Psych in in order to get this child assessed properly. I’d be writing down the purpose of the referral would be to get extra advice on how to cope with the child in school but at the back of my mind I’d be thinking in mainstream that hopefully we’d get him a statement. This is how you think and I can’t do that without the Ed Psych so I think primarily we would see the Ed Psychs as a means to an end’

(Co-researcher 1 lines 83-88)

‘the sort of idea I got when I came into the role of SENCO was that you need the EP to be able to get a statement or an education health care plan’

‘I felt a little bit like that service was a tick box to achieve something else.’

(Co-researcher 2 lines 29-31 and 33-34)

‘I got a feeling that before I wasn’t heavily involved in it, it was more they could do assessments and they could diagnose and they would take place and do a lot of work with a child getting to know the child and getting to know the parents and write a report so you could only choose two or three but they would be dealt with very deeply if you like and things move forward.’

(Co-researcher 3 lines 224-229)

4.3.2.1.2 Subtheme 11.2: EP activities experienced or valued by SENCOs

Two of the SENCO’s interviewed spoke about the EP supporting them by way of supervision or when unpicking stuck situations.

‘the Ed Psychs generally I’ve found have been a bit like our supervisors because I’ve offloaded onto them sometimes and said this parent is driving me mad or this child we just don’t know what to do’

(Co-researcher 1 lines 252-254)

'I think that EP falls in that kind of "oh my gosh what shall we do, why is this child doing this, we need some help to unpick". It is about unpicking.'

(Co-researcher 1 lines 124-126)

One SENCO spoke about the EPs role in enabling joined up work with school, parents and other professionals through consultation.

'obviously if we can get Ed Psychs involved in joined up work that is the ideal'

'that's really good practise because otherwise you're just repeating everything and it's second hand and it loses its impact because if you've got the parent in front of you and they're in the middle of telling you what life is like at home because the child who presents very well in school is smashing the place up at home it is best that the Ed Psych hears it from the mum rather than me saying and they said this and they said that'

(Co-researcher 1 lines 237-238 and 243-248)

Co-researcher 2 spoke about what she valued about the support from the link EP for her school and how advice given for one child could be generalised to benefit others;;

'I feel that thinking of some of the cases we've worked on together (name of EP's) reports on the children has given me a greater insight into where they may be in an emotional state and since (EP name) recommended all those attachment disorder books I'm still reading them but it's great because it's about helping your whole class.'

(Co-researcher 2 lines 56-60)

'As an EP suggesting that (attachment) was an avenue that then led me on to a bigger road because I ordered the books (named EP) recommended and researched a lot more about attachment and anxiety and in doing that also took on board some of those ideas (named EP) had given us for making the environment more conducive to a more calm state.'

(Co-researcher 2 lines 177-182)

In relation to MH and psychological wellbeing specifically, co-researcher 2 spoke about valuing an EP's perspective;

'from my point of view I would try and get an EP in when I thought there was a behavioural emotional wellbeing sort of element.'

(Co-researcher 2 lines 117-119)

'But it's nice to have those ideas from somebody who has them and is confident in maybe sharing some of those ideas so EPs can help with that.'

(Co-researcher 2 lines 468-469)

Throughout their interviews, all three SENCOs made reference to the types of activities they would like from their EPs or how they would like the service to be delivered. Linked to the subtheme 12.1 (time limitations) one SENCO expressed a wish for their link EP to have more time allocated to their school;

'I think it would be ideal to have EPs attached to the school in regular way so it's not just like a couple of visits a term. Somebody who would be there partly to support the SENCO.'

(Co-researcher 1 lines 605-607)

Co-researcher 2 spoke about how their EP could support emotional wellbeing at a whole school level;

'perhaps EPs can help with this; I want to provide more nurture and wellbeing in the school and I'm a little bit at a loss at the moment. I've got a room here that I want to change into a nurture facility and I'm a little bit at a loss not about the funding but sort of... I don't want to rush in there buy this buy this buy that get this get this get that to have some advice on the sort of nurture programmes about emotional wellbeing from somebody who actually knows what they're talking about'

(Co-researcher 2 lines 185-193)

An area of interest expressed by two of the SENCOs was the possibility of EPs, designing and delivering, or supporting school staff to deliver, group interventions aimed at improving pupil's wellbeing.

'I guess some sort of group work. Again you would have to get permissions and it might not be comfortable for the kids but if you did happen to get. Sometimes it's a group of girls who know each other and if they were confident about coming and seeing someone on a regular basis and working together through the issues then that would kill a few birds with one stone if you like.'

(Co-researcher 3 lines 91-95)

'maybe to set up our confidence in running social groups or communications groups I think that kind of training to facilitate those sort of things and sometimes I'm thinking of the Lego group sometimes just having a very prescriptive; this is the equipment you need, this is what you need to do is really easy to follow'

(Co-researcher 2 lines 518-522)

When talking about social skills groups, Co-researcher 2 asserted that EPs could have a role in setting up the group and then building capacity within the school staff to continue it;

'I think there is a lot of scope to have an EP working in a situation again that can be modelled to somebody else who can follow it up and continue it.'

(Co-researcher 2 lines 211-213)

Two of the SENCOs reflected on the perceived need for supervision of school staff; viewing the EP as a well-placed professional with the skills to provide this either directly or indirectly by training others in the school.

'We could all do with some level of HR/supervision because you can't talk to colleagues about some things especially when you're in charge of a team because they're your worries and if they see a crack or they see you.... that filters down. You're meant to be there to absorb theirs so where do you go?'

'I guess they (EPs) would be best placed with their experience of the kids, the parents and the staff. That's the thing isn't it?'

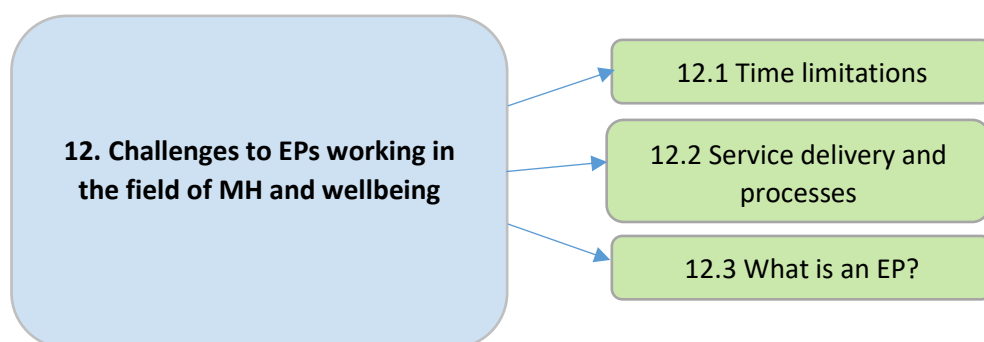
(Co-researcher 3 line 193-197 and 207-208)

'(named EP) could train me to be a supervisor because I would quite happily have the teachers come and see me on a sort of fortnightly rota and we could maybe cover their class you know'

(Co-researcher 2 lines 379-382)

4.3.2.2 Theme 12: Challenges to EPs working in the field of MH and wellbeing in schools

This theme correlates highly with theme 3, of the same name, from the EP TA. The SENCO co-researchers agreed that time limitations as well as service delivery and processes were all barriers to EPs being able support MH and wellbeing in schools. In addition this theme reflects the confusion around the EP role, particularly in relation to MH and psychological wellbeing.



4.3.2.2.1 Subtheme 12.1: Time limitations

This subtheme was prevalent in all three SENCO interviews. The SENCOs expressed a consciousness that EP time in their school is limited.

'I think they're under pressure because they have too many schools quite often. They try not to mention it too much but they will suddenly say in the past "oh I've had to take someone's gone off sick or on maternity leave and I've had to take on extra schools and I really am pushed at the moment".'

(Co-researcher 1 lines 424-428)

'I really value (named EP) support but I only see (EP) not very often and it's like you said it's one individual here, one individual there but what we've talked about is much more widely spread impact'

(Co-researcher 2 lines 588-591)

'I think with mental health especially it's got to be regular and it's got to be consistent and I can't see them (EPs) having the time to do that honestly.'

(Co-researcher 3 lines 49-51)

4.3.2.2.2 Subtheme 12.2: Service delivery and processes

It is acknowledged that the above subthemes 11.3 (SENCO wish list), 12.1 (time limitations) and subtheme 12.2 (service delivery and processes) overlap. When asked what the barriers are to EPs offering support around MH and emotional wellbeing, co-researcher 3 spoke about her preference for the EP service to have trading capacity;

'Their time constraints I'm guessing. Obviously if it was part of the service and it was open to us we would be buying into it.'

(Co-researcher 3 lines 189-193)

Another reference to the model of service delivery was made by co-researcher 3, who perceived the change to the consultation model as a capacity or budgetary consideration rather than a shift underpinned by psychological principles.

'But aren't they cutting down your services as well? That was the reason I think it was called a restructure but I think it was cutting the sessions down to 45 minutes it was all very regimented and everything.'

(Co-researcher 3 lines 292-294)

Co-researcher 3 provided some honest and valuable feedback about the processes for obtaining EP involvement. She expressed some frustration about having to fill in a single service request

form as well as an additional information form and referred to the paper work as ‘*a bit of constraint more than a support.*’ (line 371). Co-researcher 3 reflected on the difficulties she had experienced in obtaining signed consent from parents prior to a consultation;

‘Because one boy has terrible circumstances at home and I was desperate to get his mum’s signature and it just so happened that we had an old one from a previous visit that didn’t happen or something we used that one but it just seems a bit crazy to me. It’s like we’re not trusted. I’ve had a conversation with the parents. I can document the fact I’ve had a conversation with them. I can put a time down, the date down I could put the exact words the parents said but actually getting that physical signature puts me off.’

(Co-researcher 3 lines 319-325)

Another process identified by one of the SENCOs as challenging was the length of EP reports and the number of provisions listed to meet the suggested MH and wellbeing outcomes.

‘I’ve got a list of say sometimes 30 things I’ve got to be fulfilling on their EHCP. It’s ridiculous. And it’s all a legal requirement. It’s scary. Luckily I sleep at night but if you take it very literally you would think this is impossible and I think that would also be handy when Ed Psychs give advice that they prioritise’

(Co-researcher 1 lines 189-195)

‘I think regular reports that are shorter are so much better because we’re reviewing students quite regularly’

(Co-researcher 1 lines 204-205)

[4.3.2.2.3 Subtheme 12.3: What is an EP?](#)

‘people don’t really know what the EP function is’

(Co-researcher 2 line 556)

This subtheme links to the subtheme 11.1 (traditional view of the EP role) and it is acknowledged that the purpose of this research is, in part, to challenge the view that the EP role is exclusively to assess individual children with special educational needs. The exploratory and participatory nature of the research invited co-researchers to consider what the EP role is.

‘I think that may be primarily one of the problems for schools actually what is an EP? So actually maybe it needs a more defined role’

(Co-researcher 2 lines 87-89)

Only co-researcher 2 reflected explicitly on this question, however, co-researchers 1 and 3 spoke more about EPs carrying out assessment, indicating a well-established perception. Both Co-researchers 1 and 3 did see the value of considering what else EPs do as the interviews went on and began to question their own experiences and perceptions. When asked about whether they

had experienced an EP supporting the wellbeing of school staff, co-researcher 3 expressed that it was not something they had considered before.

'I don't know I've not thought about that one.'

(Co-researcher 3 line 155)

Similarly, co-researcher 1 had to give careful consideration to the question; 'can you think of any examples of MH and wellbeing work that you might have had from EPs at an individual pupil level?'.

'I'm trying to rack my brains.....I mean in my experience EPs who have seen students individually have been trying to assess them in one way or another in order to write a report.'

'thinking about that, it's just come back to me. I'm not sure which school it was I had an Ed Psych who was helping me at one time with a circle of friends in secondary and she used to come at a regular time'

(Co-researcher 1 lines 129-131 and 148-150)

Co-researcher 2 suggested that the question, 'what is an EP?' needed to be addressed with schools and other services to ensure a joined up understanding.

'I think there needs to be a collaboration with all of the services about what the role is as an EP not just get the EP in to assess their cognitive learning but what's the next step after that?'

(Co-researcher 2 lines 534-536)

In summary, the analysis of the SENCO interviews suggests that there are many different factors impacting on the MH and psychological wellbeing of CYP and staff in schools. The SENCOs reflected on the pressures of working in schools and how staff wellbeing is affected. They also identified a perceived lack of confidence in school staff to support the growing number of CYP who are experiencing MH difficulties. The SENCOs expressed similar values to the EPs around the importance of focusing on MH and wellbeing. Differences were found, however, in the perception of the EP role between the SENCOs and the EPs. The SENCOs had not previously considered the EP role to include MH and wellbeing within schools but rather carrying out assessment. Through questioning they were, however, able to give examples of EPs providing wellbeing support but this may have not been recognised as such at the time. The SENCOs called for clarity around the EP role and the activities that the EP service can offer. This has implications for practice and validates the perceived need for this research. SENCOs expressed that they would value more support from EPs to deliver therapeutic interventions and set up supervision for staff. They identified a need for more staff training around MH issues facing CYP and viewed EPs as being well placed to do this.

4.4 Working Party

The working party consisted of the principal researcher and the three SENCO co-researchers. The principal researcher provided a comfortable and quiet meeting room with food and drink to ensure a relaxed and nurturing environment was created. The working party began with a review of the SENCO thematic map and discussed the codes for each theme in turn in order to ensure member checks were carried out thoroughly. The review of the SENCO thematic map indicated a high level of agreement with all three SENCOs. One additional subtheme was suggested (subtheme 8.3: training and skills of school staff). The codes for this subtheme were, therefore, identified retrospectively, most of the codes were taken from the subtheme 8.2 (factors which challenge wellbeing in schools). The SENCOs reiterated that the difficulties with increased pressure to achieve targets and measure outcomes, coupled with reduced budgets and capacity for subjects such as PSHE and the arts, are having a negative impact on the wellbeing of CYP and staff in schools. The SENCOs viewed EPs as being able to support with the Tier 1 or universal support by helping staff in schools to know how to recognise early signs of MH difficulties and put early interventions in place. They also suggested that EPs could help to build confidence in schools to talk about MH and psychological wellbeing and thus reduce stigma.

The SENCOs all agreed that there was a general feeling in their schools that staff feel under skilled to deal with MH difficulties, but are still expected to do so. There was also an agreement that school staff lack awareness of the links between behaviour and SEMH and the move away from focusing on behaviour difficulties, as outlined in the SEND Code of Practice (2014). There was a discussion around the LA's recent move towards all schools having a 'Behaviour Lead' and perhaps a MH and wellbeing lead would be more appropriate, although it was agreed that the scope of this role would need to be wider. The SENCOs agreed with subtheme 11.3 (SENCO wish list) and confirmed that they would like:

- A continued link EPs who can regularly visit the school and build rapport with staff. All three SENCOs said that they would like more time from their EP;
- More clarity about what the EP service can/cannot offer and how much support each school can expect;
- EP support to build capacity of school staff in dealing with MH issues. How to identify early signs of MH difficulties, what to do/say when an issue has been identified and who to refer to for additional support;

- EP support to set up and evaluate wellbeing interventions such as mindfulness, CBT approaches, social skills groups;
- EP support to set up and facilitate supervision opportunities for school staff.

On exploring the EP thematic map, the SENCOs were pleased that the EPs had considered the wellbeing of staff in schools as important to them. They were interested in the different examples of EPs supporting MH and wellbeing in schools (theme 6) and expressed that they were not aware of the full scope of EP activities. This led to a discussion on different perceptions of the EP role (theme 4) and the SENCOs were pleased that the EPs had identified a need for clarity around EP activities on offer.

There was a focus on and linking up of the theme 7 (vision for the future) from the EP thematic map and subtheme 11.3 (SENCO wish list) on the SENCO thematic map. These themes were fed into the agreed actions and next steps.

4.4.1 Agreed actions and next steps

Agreed outcomes	Actions suggested to meet outcomes	Who	When
For the EP service as a whole to consider how EPs can support schools to promote good MH and wellbeing	Share research findings with whole EP service, advocating for SENCOs wishes.	Principal researcher & EP participants	June CPD day
For SENCOs to have a clear understand about the role of the EP and the activities they can offer.	Explore the possibility of EPs providing input to the National SENCO awards about the role of the EP	Principal researcher & EP participants	Summer Term 2017
	Produce leaflet/webpage explaining the role of the EP and outlining the activities that EPs are able to offer; particularly in relation to MH and wellbeing in schools at an individual, group and systemic level. Refer to SENCO wish list. Consider how to balance EP capacity, current service delivery and the needs/wishes of schools.	Principal researcher & EP participants	Ready to send out in September 2017 – Add to local offer?
	Discuss scope of EP role and findings of research with SENCO clusters	SENCO co-researchers	Autumn Term 2017 cluster groups.
For schools to have a dedicated role focusing on MH and wellbeing	Explore the possibility of schools having a dedicated MH and wellbeing lead.	SENCOs to discuss with the Heads in their schools	April 2017
For the different services supporting the MH and wellbeing of CYP to increase multi-agency working and be clear about the remit of each service and where there may be overlaps.	Liaise with LA's Health and Wellbeing Board and the CAMHS strategic commissioning group to share findings and discuss how the EP service can fit with the new CAMHS Thrive Model.	Principal researcher & EP participants	Summer Term 2017

Table 3: Working party agreed actions and next steps

4.5 Chapter Summary

Chapter four starts with a detailed breakdown of the TA of the EP interviews, including a thematic map. The findings for the SENCO interviews are presented in a second thematic map, followed by descriptions, including quotes, of the themes identified. The discussions that took place during the working party are documented along with the next steps planned. Chapter five will provide a further examination of the thematic analysis in light of the research questions, explore implications for practice and future research, and will outline the strengths and limitations of this research.

Chapter Five: Discussion

5.1 Overview of Chapter

This chapter begins by answering the research questions documented in chapter two in light of the findings presented in chapter four. Links are made to relevant research identified in chapter two. Next, of the aims of the research and implications for EP practice are reviewed. The process of feeding back the research findings to the relevant stakeholders is then discussed. The strengths and limitations of the research are explored and the implications for future research considered. The principal researcher reflects on the research process and finally the conclusion draws the thesis to a close.

5.2 Analysis of findings in light of research questions

5.2.1 RQ1. Do EPs and SENCOs believe MH and psychological wellbeing in schools is part of the EP role?

The data analysis revealed that the perception of the EP role in relation to MH and psychological wellbeing differs between the EP participants and SENCO co-researchers. Whilst the EPs believe that MH and psychological wellbeing is very much part of their role, the SENCOs had not previously considered this to be so. This has significant implications for practice and highlights the need not only for a shared vision but also for an active promotion by EPs of their skills and training in the field of MH and wellbeing.

The EPs were explicit in describing how they gave a conscious priority to the MH and wellbeing of all those with whom they worked, one EP describing it as ‘always in the thread of my work’ (Participant 1 line 155). This mirrors the suggestion by Roffey (2015) that a wellbeing focus ‘can be threaded through consultations, conversations and offers’ (p. 25), activities which are known to be part of EP’s toolbox.

Although the research highlighted an awareness of a wellbeing focus being important to EPs, it could be argued that that this has not been made explicit to staff in schools and other professionals, as data analysis from SENCOs interviews suggested. This research, therefore, concurs with that carried out by Ashton and Roberts (2006), discussed in chapter one, which found a discrepancy between how EPs viewed themselves and how they were viewed by SENCOs.

5.2.2 RQ2. What value do EPs place on MH and psychological wellbeing work in schools?

All four of the EP participants expressed the value and necessity of EP work in schools to support MH and wellbeing, given the link between emotional wellbeing and academic achievement and the overlap between special educational needs and emotional wellbeing. All of the EPs also expressed a desire to work in the field of MH and wellbeing, however, they acknowledged that this wish may not be consistent throughout the profession. This research identified an unease in the EP profession with the term 'mental health' and it could be argued that this is due to shift away from a medical or child deficit model toward an eco-systemic perspective. Fee (2011) found a lack of shared vision about how EPs can meet the needs of CYP with MH difficulties in light of the tension between the dominant medical model of MH, including the process of referral and identification of MH difficulties, and the more holistic and eco-systemic stance of the EP professions.

5.2.3 RQ3. Do SENCOs value MH and psychological wellbeing work from EPs in schools?

Although the SENCOs had not experienced wellbeing interventions delivered by EPs, the research found that they valued the EP perspective when supporting CYP with social, emotional and behavioural difficulties. One SENCO valued the EP role in supporting collaborative problem solving with parents and other professionals. The research also found that EPs were able to affect positive change at a whole class level by enabling a greater insight into issues such as attachment. Subtheme 11.3 (SENCO wish list) reflected the activities that SENCO would value from EPs, including: supervision to support the wellbeing of school staff; training to upskill teachers; and support to set up, deliver and evaluate wellbeing interventions in schools.

5.2.4 RQ4. What are the examples of MH and psychological wellbeing support in schools from EPs at an individual, group and systems level?

MacKay (2007) suggested that EP services should include therapeutic interventions in the range of service they routinely offer. Although this research indicated that therapeutic interventions were not routinely offered in the LA where the research took place, the TA of the EP interviews evidenced examples of therapeutic interventions such as CBT, mindfulness, circle of friends and PCP approaches. The TA indicated that most of the therapeutic work that had taken place was by trainee EPs in order to fulfil university criteria and these findings are potentially significant, if one is to enquire why trainees are involved in interventions not routinely offered by EPs.

Atkinson *et al* (2014) found that 92% of the 455 EPs surveyed used therapeutic interventions as part of their practice, SFBT and CBT and PCP reported as being the most widely used. However, the issue of what is considered therapeutic intervention was suggested to have influenced this percentage, for example 66% of respondents reported that they use therapeutic interventions as part of consultation.

Atkinson *et al* (2011) evaluated two small scale qualitative studies and identified one theme was schools were not always aware that EPs offer therapeutic interventions. This research found that while the EP participants were able to give examples of either themselves or colleagues carrying out interventions, the SENCOs had difficulty in thinking of any interventions carried out in their schools. This highlights the need for EPs to be explicit about the types of work they do as reflected in the subthemes 7.1 (staking a claim) and 7.2 (need for clarity around EP services on offer).

Rait *et al* (2010) suggested that EPs are well placed to support school staff in delivering CBT and influencing whole-school approaches such as SEAL. This research found that SENCOs would like EPs to facilitate the setting up of interventions in school and build the capacity and confidence of school staff to continue the running of such interventions. This is reflected in subtheme 4.3 (SENCO wish list) and was reiterated during the working party.

The issue of school staff training and capacity building, particularly in relation to MH and wellbeing of CYP, was identified as an area of need in schools (subthemes 2.2 and 8.3). The role of EPs in offering training to school staff was mentioned by two of the EP participants; providing training around nurture groups and self-harm. Whilst the SENCOs did not mention any staff training they had received in relation to MH and wellbeing (subtheme 11.2), they did suggest that they would value this in the future, specifically around delivering therapeutic groups or supervision for teaching staff (subtheme 11.3). Boorn *et al* (2010) highlighted how EPs can have an impact at school level by providing staff training to promote an optimal environment for learning and emotional wellbeing.

Wyn, *et al* (2000) suggested that rather than assigning most resources to a few students with the highest needs, it would be more effective to train every teacher to be skilled in wellbeing. This research aligns with this suggestion by acknowledging a role for EPs to train teachers and thereby increase their confidence to talk about wellbeing and address issues around MH in school.

5.2.5 RQ5. How can EPs support the MH and psychological wellbeing of staff in schools?

Subtheme 2.1 (staff wellbeing) reflected the EPs' concerns around the wellbeing of school staff and how the pressures of working in schools can have a negative impact on their wellbeing. Both

the EPs and the SENCOs demonstrated awareness that teacher wellbeing is critical to both student wellbeing and learning outcomes, as suggested by Lovewell (2012). Subthemes 11.2 (EP activities experienced or valued by SENCOs) and 6.2 (EPs working at school level) demonstrate how EPs could support the MH and wellbeing of school staff; through setting up opportunities for peer supervision and providing supervision for SENCOs. Sharrocks (2014) suggested that by encouraging staff to talk about their own wellbeing, an ethos of openness and a reduction in the stigma around MH can be facilitated. Sharrocks (2014), Wood (2016) and Osborne and Burton (2014) all reported positive outcomes from EPs providing or facilitating supervision for school staff.

5.2.6 RQ6. Are there any barriers to EPs offering this type of work?

Themes 3 and 12 (challenges to EPs working in the field of MH and wellbeing) reflected the perception shared by both SENCOs and EPs that there are several barriers to EPs supporting MH and wellbeing in schools. One barrier to EPs offering support for MH and wellbeing identified by some of the EP participants is the impact of government agenda, budgets and guidance. There was a recognition that the voice of the EP profession is missing in government guidance around MH of CYP, such as Future in Mind (2015) and Mental Health and Behaviour in Schools (2015). The UK Government Prime Minister's Office (2017) announced plans to improve the MH of CYP by focusing on preventing MH difficulties by intervening early in schools, however, no mention was made of EPs being well placed to support this agenda. This omission led to the President of the BPS (2017) positioning EPs as professionals who are able to assist the government in improving universal services for CYPs' wellbeing, while pointing out that recent cuts to LA budgets had a negative effect on the capacity of EP services to support wellbeing in schools.

It can be argued that public sector cuts coupled with the change in SEN legislation have led to a mixed picture, with Local Authority EPs reducing activities related to early intervention work and increasing statutory assessment work. It was recognised by SENCOs and EPs participating in this study that the majority of EP time was used for statutory work, such as EHCP assessments. MacKay (2007) suggested that increases in statutory work in the past had led to an atrophy of therapeutic skills in the profession. Although MacKay proposed that a rise in the use of therapeutic interventions was evident in 2007 when the research was carried out, it could be argued that due to budget cuts in LAs following the 2008 recession, the opportunities for using therapeutic interventions has again declined.

Another barrier to EPs being able to support MH and wellbeing in schools, identified in both the EP and SENCO interviews, is the model of service delivery (subthemes 3.4 and 12.2), with inherent time limitations built in. The EP service needs to ensure that the activities offered are realistic in light of under-staffing and a perceived rise in statutory work, as well as the needs and expectations of schools. As outlined in Chapter 1, the EP service where this research took place used a consultation model of service delivery, whereby schools could book 45 minute slots with an EP to discuss an issue or a CYP experiencing difficulties. Alongside consultations, the EP duties were statutory work, running contact line (a quick queries helpline run by EPs) and crisis support. EPs did carry out individual casework occasionally but this was after a consultation and a graduated response, by which time improvements had usually been made or an EHC assessment requested.

The underpinning psychology guiding the consultation model of service delivery is eco-systemic (Bronfenbrenner 1979). This encourages the adults around a CYP to think about how the environment can be changed rather than the CYP themselves. The EP consultation principles invite professionals and parents to move away from a problem focus and/or child deficit model towards solutions. This research found, however, that SENCOs viewed the change to a consultation model of service delivery to have been driven by understaffing and reduced local authority budgets. This has implications for how the EP service communicates with its stakeholders and service users. The findings from the EP interviews were mixed, with one EP suggesting that the consultation model of service delivery has enabled her to open up more conversations around MH and wellbeing. The other two EPs felt somewhat restricted by the consultation model; particularly by not being able to deliver individual therapeutic interventions. It should be noted, nonetheless, that these somewhat negative views of a newly adopted consultation model might also constitute a transitory reaction to change in the EP service, as the model had only been implemented for a limited amount of time.

Atkinson *et al* (2011) identified anxiety over role definitions as one of the threats to EPs offering therapeutic interventions. Theme 4 (differing perceptions of the EP role) reflected that other professionals did not usually view EPs as being able to support MH and wellbeing in schools and that even within the role there were differing opinions about the scope of the role. Subtheme 12.3 (what is an EP?) revealed that SENCOs were not clear about the remit of the EP role and would have liked clarity around this. Similarly subtheme 10.1 (perception of CAMHS) highlighted that SENCOs would usually consider CAMHS to be the first port of call if they were concerned about the MH of a pupil. Miller (2016) called for EPs and CPs to gain a clearer understanding of one another's roles to enhance joint working. This research concurs with this and goes further to suggest that all professionals working with CYP in the field of MH and wellbeing should have a

clearer understanding of the different services on offer and the roles of the professionals who can provide support. Dunsmuir and Hardy (2016) suggested that, 'across agencies a clear distinction should be made between different roles and responsibilities, acknowledgement of positive contributions made but also support and challenge to address areas of under-performance' (p.11). However, this needs to be balanced with the fundamental need for multi-disciplinary practice to ensure appropriate safeguarding of CYP.

Another challenge to EPs supporting MH and wellbeing in schools, identified by the EP participants, is the retention of EPs, particularly in local authority EP services. Dunsmuir and Hardy (2016) highlighted the national changing picture of the commissioning and delivery of Educational Psychology service, including the increasing trend of non-local authority providers working in competition with LA EP service. A national shortage of EPs (NAPEP 2015) coupled with the increase in independent consortia, private companies and non-profit organisations offering psychological support for schools and CYP, is having a great impact on recruitment and retention of EPs for all LA EPs services. This research found a paradoxical situation whereby a reduction in capacity has led to a narrowing of opportunities for EPs to engage in a full variety of activities including MH and wellbeing support in schools. The research found a tendency for experienced EPs to remain in the LA EP service and reflected on the difficulty in recruiting and retaining newly qualified EPs.

5.2.7 RQ7. How do EPs and SENCOs think the role of the EP could develop further to include MH and psychological wellbeing?

Theme 7 (vision for EPs supporting MH and wellbeing in schools) suggests ways in which the EP role could be developed further. The EP participants acknowledged that EPs need to be clear about their role, what skills they can offer, and how well placed they are to support MH and wellbeing in schools. Suggestions made were:

- For EPs to stake a claim in being able to offer MH and wellbeing support to schools and communicate a shared vision;
- To have 'staff wellbeing' as an area to be considered during the annual contact conversations between EPs and SENCOs;
- For the EP service as a whole to agree particular training packages that EPs can either deliver to school staff or recommend;
- For the EP service to clearly promote the skills and training EPs have within the service to schools;

- For the EP service to be clear about what activities it can offer and how these differs from other services used by schools to support the MH and wellbeing of CYP.

Subtheme 11.3 outlines what the SENCO co-researchers would like the EP service to offer, which was also reiterated during the working party:

- A link EP who can regularly visit the school and build rapport with staff. All three SENCOs said that they would like more time from their EP;
- More clarity about what the EP service can/cannot offer and how much support each school can expect;
- EP support to build capacity of school staff in dealing with MH issues. How to identify early signs of MH difficulties, what to do/say when an issue has been identified and who to refer to for additional support;
- EP support to set up and evaluate wellbeing interventions such as mindfulness, CBT approaches, social skills groups;
- EP support to set up and facilitate supervision opportunities for school staff.

This research highlights the importance for LA run EP services to develop their role in supporting MH and wellbeing in schools to meet the growing MH needs of CYP and to minimise the loss of newly qualified EPs to the independent sector. Subtheme 3.3 explores the risk the profession takes when the scope of the EP role is narrowed to statutory work. However, this research also supports the view that good MH and positive psychological wellbeing can be promoted by EPs whilst carrying out statutory work and during consultations. It can, therefore, be suggested that as long as EPs are explicit about their role in promoting positive MH and wellbeing, it can be embedded in all their duties, both statutory and non-statutory.

5.2.8 RQ8. What training, skills and resources do EPs need in order to deliver this wellbeing agenda?

The findings suggest that the doctoral training route for EPs has influenced a perceived shift in the profession towards a focus on MH and wellbeing. In the experience of the author, therapeutic interventions such as CBT, PCP and Video Interaction Guidance (VIG) are part of the doctoral training and as such trainee EPs expect to carry out or facilitate the delivery of such interventions in schools. Subtheme 5.2 (EP training route and CPD) highlights a tension between espoused practice taught during the University training and practice in the real world where opportunities to deliver therapeutic interventions are not apparent. However, as such interventions were identified by the SENCOs as being valued, it could be argued that there should be more opportunities for

EPs to set up or deliver interventions in schools. One way to achieve this would be for EPs to negotiate this type of work with their SENCOs, having made it clear that this is a service they are able to offer. Another issue highlighted by this research was the need for CPD and ongoing training for EPs to be able to deliver a wellbeing agenda. Dunsmuir and Hardy (2016) advised that in order for practitioner psychologists to deliver therapeutic interventions they are required to;

- have successfully undertaken additional training;
- be actively working in therapeutic practice;
- undertake regular supervision from an appropriately qualified supervisor;
- be committed to developing the evidence base of the therapeutic practice; and
- be actively engaged in gaining further training and development in therapeutic practice.

(Dunsmuir and Hardy 2016 p.19)

This research showed that although EPs coming through the doctoral training route were undertaking additional training, having regular supervision and were committed to developing the evidence base, they were not always able to actively engage in therapeutic practice once fully qualified, in the local authority where the research took place. This identifies an issue that needs to be addressed to ensure EPs are able to fulfil the BPS Code of Ethics and Conduct (2009) by practicing within the boundaries of competence, as well as to improve retention. EP services also need to ensure that the delivery of psychological therapies is included as part of the CDP programme.

Fee (2011) developed a model that demonstrated the interaction of factors found to enable EPs to deliver a wellbeing agenda. The themes identified in this research as being important to the role of the EP in supporting MH and wellbeing in schools mirror the concepts described in Fee's model (2011). The Clear Vision element of this model fits with theme 7 (vision for EPs supporting MH and wellbeing in schools) and subtheme 12.3 (What is an EP?). Fee (2011) proposed a need for an eclectic framework conducive of wellbeing work and this research identified the impact of service delivery on EP's capacity to offer MH and wellbeing support to schools. This research also highlighted the need for integrated working as well as a clearer understanding of the role and boundaries of all services supporting the wellbeing of CYP. The research also found that training, CPD and supervision of EPs are important factors which enable EPs to deliver a wellbeing agenda.

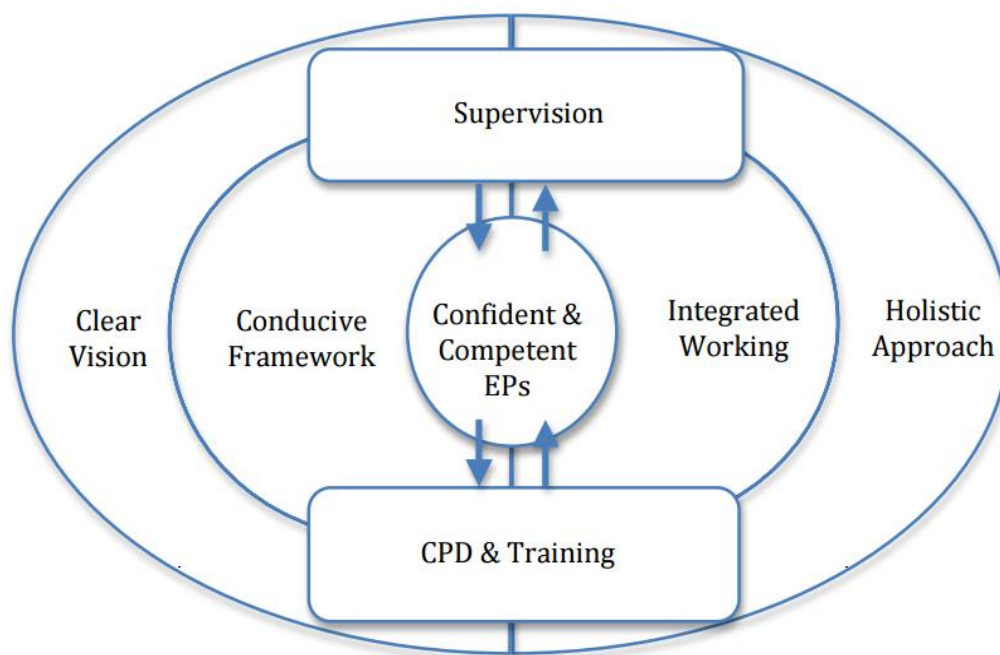


Figure 4: A model for EPs to Engage in Mental Health and Psychological Wellbeing Work with Children and young people (Fee 2011 p. 141)

5.3 Review of the rationale and aims of the research

The overarching aim of the research was to help bring MH and psychological wellbeing to the forefront of EP practice in the local authority where the research took place. It should be acknowledged that a shift towards a wellbeing focus had already been noticed by some EPs in the LA authority prior to the research taking place:

‘what I think is really interesting about the profession I think that is really shifting. I think over the last probably five or six years I’ve seen it myself where there’s that real shift in kind of opening what we do up to the emotional health and wellbeing bit and the other bits all tie in but really having that underpinning. Well I’ve seen that anyway.’

(Participant 1 lines 327-341 subtheme 4.2)

During stage one of the research (refer to figure 1) the principal researcher explored what was already happening within the service in relation to the role for EPs in supporting MH and psychological wellbeing in schools. This included the principal researcher joining a learning set

with a MH and emotional wellbeing focus. It is also relevant to note that before the research took place a whole service CDP day with a focus on staff wellbeing had already been allocated for May 2017. It is suggested that this action research could facilitate this shift over time, towards positioning MH and psychological wellbeing at the forefront of EP practice. This could be realised through feedback to the whole service, the MH and emotional wellbeing learning set within the EP service, other services and professionals at SENCO cluster meetings, within the schools where the co-researchers are based and with the CAMHS commissioning group. As this action research intends to extend beyond the scope of this thesis, it is difficult to review the overarching aim fully.

Another aim of the research was to inform areas for consideration in the training and CPD of EPs. This research explored the EP training route and need for CPD (subtheme 5.2) and examined the relationship between the retention of EPs within the service and their ability to utilise their full range of skills and knowledge (subtheme 3.3). From the perspective of the author, there is a focus on learning therapeutic skills on the EP doctoral courses and this research found that the majority of therapeutic interventions taking place within the EP service are facilitated by trainee EPs. The scope for all EPs to be involved in designing, facilitating and/or evaluating interventions needs, therefore, to be addressed in the service to support the retention of newly qualified EPs.

The purpose of this research was twofold: to explore the views of EPs and SENCOs in order to develop a better understanding of the EP role in supporting MH and wellbeing in schools; to empower SENCOs to suggest practical outcomes for future EP practice. The principal researcher contends that this twofold purpose has been achieved. An exploration of the views of both EPs and SENCOs, through semi-structured interviews and TA, revealed a difference between the two professions in their understanding of what the EP role is in supporting MH and wellbeing in schools. The research found that although SENCOs did not typically view MH and wellbeing support as being part of the EP role, they were able to move on from this view to understand the types of activities that could be offered by EPs and develop an understanding of how EPs maintain a wellbeing focus throughout their more established duties. The research also highlighted the need for EPs to be more explicit about this role, which has implications for future EP practice. The working party element of the research enabled the SENCO co-researchers, with the support of the principal researcher and the EP participants, to agree next steps and plan changes for future EP service delivery. The next steps agreed at the working party will be explored further under the 'Implications for EP practice' heading below.

5.4 Implications for EP practice

By addressing the research questions above and agreeing next steps during the working party stage of the research, many implications for EP practice have been identified. Primarily the implications are for the EP service where the research took place, however, some of the implications summarised below may be relevant to other LA EP services across England.

5.4.1 Need for clear communication of the EP role and what activities can be offered to services users and other professionals.

The findings of this research concur with Fee (2011) who suggested that there was a need for a shared vision of the EP role in relation to MH and wellbeing. An identified solution to this issue is for the EP service to provide clear, effective and frequent communication for service users and other professionals. The findings also suggested the importance of EPs communicating their psychological approaches and frameworks for practice so that SENCOs and other professionals understand the EP profession's move away from a child deficit model towards an eco-systemic approach. Within the EP service where the research took place, it is important that the consultation model of service delivery is understood in relation to the theoretical underpinnings. Several actions were agreed during the working party stage of the research to address the need for clearer communication of the EP role:

- Share findings of this research to whole service advocating for the SENCOs;
- Produce a leaflet/webpage on behalf of the EP service to explain the role of the EP and how they can support MH and wellbeing in schools within the current model of service delivery;
- Explore the possibility of EPs presenting at the National SENCO awards;
- Liaise with LA's Health and Wellbeing board and CAMHS commissioning group.

5.4.2 Need for promotion of the EP professions' skills, training and position in supporting MH and wellbeing in schools.

This research found that EPs feel a need for the profession to stake a claim in the field of MH and psychological wellbeing. EPs interviewed reflected on the doctoral training route and how trainee EPs are taught the basics of therapeutic approaches such as CBT and PCP. The research also

found that many EPs in the service are trained VIG practitioners. This expertise needs to be valued and shared within the service and with the wider community to ensure schools and families understand that EPs are well placed to support MH and wellbeing in schools.

5.4.3 EPs are well placed to facilitate or set up supervision opportunities for school staff.

Both the EPs and SENCOs were concerned about staff wellbeing in schools. SENCOs reflected on a lack of supervision for school staff and identified EPs as having the skills and neutral position to be able to provide supervision for school staff or train SENCOs in solution focused supervision approaches. Previous research has indicated that supervision of school staff facilitated by EPs is effective. The SENCOs and EPs in this study both identified that EPs are already doing this either through informal supervision for SENCOs or through solution circles for head teachers and SENCO clusters. This research supports previous research that has suggested that EPs are well placed to provide effective supervision opportunities for school staff (Wood 2016, Osborne and Burton 2014). During the working party the SENCOs reiterated that they would like the EPs to offer supervision more widely and it was agreed that any new communication (i.e. leaflet or webpage) would include this.

5.4.4 Importance of EPs having opportunities to facilitate or deliver therapeutic interventions.

This research found that SENCOs would value support to deliver therapeutic interventions within their schools. Although the EPs interviewed were able to share their experiences of facilitating interventions, the SENCOs were unable to recall any wellbeing interventions facilitated by their EPs indicating that this practice is not regular or widespread across the county. This has implications for the retention of EPs who recognised it as a valued part of the role. It also has implications for ensuring ethical practice. The HCPC standards of proficiency highlight that EPs should be “able to develop and apply effective interventions to promote psychological wellbeing, social, emotional and behavioural development” (HCPC, 2015, p.24). Taking this one step further, the guidance given by Dunsmuir and Hardy (2016) suggested that psychologists should be actively working in therapeutic practice in order to deliver interventions ethically.

5.4.5 Importance of the EP service being able to offer school staff training and supporting a whole school approach to positive MH and wellbeing.

The findings of this research indicate that schools would value training to upskill staff to confidently support CYP with MH difficulties and to deliver whole school approaches to wellbeing. This focus on systems would fit with recommendations in the Future in Mind report (2015) to place an emphasis on universal services to promote positive emotional wellbeing and prevent MH difficulties.

5.4.6 Importance of working collaboratively with other professionals who support the MH and wellbeing of CYP and developing an understanding of how services differ.

The findings indicate that SENCOs are unsure about where the role of the EP fits with other services offering MH and wellbeing support to CYP. Although the SENCOs interviewed associated CAMHS with CYP with MH difficulties, they also reflected on the difficulties that families face when trying to access the service. The issue of CAMHS being a clinic-based rather than school-based service was also identified. Although Miller (2016) found that there was a professional defensiveness between EPs and CPs, the EPs interviewed in this study identified a project supported by the EP service for school-based CAMHS consultations. Findings from the EP interviews also indicated that EPs are open to engage in multi-agency work. However, it was agreed that there is still work to be done around role boundaries and joined up working to ensure CYP get the most relevant and effective support.

5.5 Feedback

Feedback from the analysis of the EP and SENCO interviews was given to EP participants via email. The thematic map depicting the SENCO views was communicated to EPs for information only, but they were asked to check that the themes identified from the EP interviews reflected their views. All the EPs agreed with the themes identified and felt that the map gave a true reflection of their views. The SENCO co-researchers fed back their views of the thematic maps during the working party stage of the research, which also provided an opportunity for member checking. The SENCOs expressed their enjoyment of being co-researchers and were pleased that their views had been being sought.

With clear communication of the EP role in supporting MH and wellbeing in schools being an important implication for practice arising from this research, it is acknowledged that careful consideration needs to be given to who the findings are shared with. During the working party it was agreed that the findings would be shared with the following:

- The EP service during a CPD day and via email;
- The SENCO co-researchers' schools;
- SENCO clusters;
- The Health and Wellbeing board;
- The CAMHS commissioning group.

Following the write up of this thesis, the findings will be submitted for publication in one of the Educational Psychology journals, and presented to the relevant professional bodies to inform their responses to the upcoming green paper into the MH of CYP announced by the government in January 2017.

5.6 Limitations of this research and implications for future research

This qualitative research was not intended to produce measurable, significant results that could be generalised to a wider populations such as all EPs and SENCOs. Rather it aimed to explore the views of EPs and SENCOs in one particular LA at one particular point in time, in order to increase understanding of the EP role in relation to MH and psychological wellbeing and inform future practice. The implications of the findings are, therefore, limited to the LA in which the research took place. However, they are indicative and may be of interest to other EP services in England who wish to stake a claim in this field.

The real world nature of this research meant that external factors had an impact on timescales and research design. With the principal researcher being a trainee EP on placement within the EP service where the research took place, other duties and responsibilities needed to be balanced with the research activities. It should also be acknowledged that the integrated services for learning, within which the EP service sits, was going through a re-structuring consultation as the research was taking place. This limited the capacity for the EP participants to engage fully in the process. Whilst the EP interviews yielded rich data, it was hoped that the EPs would also become co-researchers by joining the working party, however this was not possible due to their diaries being full over an extended period of time. Some of the EPs and SENCOs worked part time which

meant that the principal researcher was unable to find a mutually convenient time for all of the SENCOs and EPs to get together. In retrospect, it would have been beneficial to secure the working party right at the start of the process and make attendance one of the inclusion criteria for all of the EP participants and SENCOs. This research was, therefore not able to fully achieve a shared understanding of the EP role in supporting MH and wellbeing in school, although it was able to start this journey and it is expected that this will continue outside the scope of this thesis.

An obvious limitation of this research was the lack of pupil voice. What are CYPs' views about the role of EPs in supporting their MH and wellbeing? Although it is very important for the EP profession to consider this, the ethical and logistical implications for carrying out research to address this question were considered to be too challenging within the timeframe available, particularly as direct work with CYP was limited in the LA where the research took place. Future research to explore the views of CYP who have received support from the EP service for MH difficulties would be highly valued. Pupil participation in research around wellbeing interventions in schools more generally would also be helpful.

The small sample of SENCO co-researchers means that the views presented are not representative of all the SENCOs in the LA. Having a SENCO representative from primary, secondary and special schools was a strength, however, and ensured that the views were not from any specific SENCO group. Future research to seek the views of a larger number of SENCOs in the LA that this study took place in, perhaps through clusters, is recommended. As SENCOs are currently the professionals who work most closely with EPs in schools, it is important that research both takes into account their views and is shared with them, so they are aware of the current evidence-base.

Another limitation of the research was the voluntary method of recruitment of EP participants. By presenting the proposed research to the EP service, the EPs with an interest in MH and wellbeing may have been more likely to volunteer than others. This said, the EPs recruited had different levels of responsibility, differing lengths of service and represented three of the five teams. Two of the EPs had been through the masters training route while two had completed the doctoral course. These factors enabled a collection of views from a cross-section of EPs within the service.

5.7 Reflexivity

To further acknowledge the impact of the researcher on the research methods, data collection and analysis, findings and conclusions, this part of the thesis is written in the first person.

5.7.1 Starting the research journey

With a prior passion for all things mathematical, I was sure at the start of this journey that a quantitative or mixed-methods design would be my research of choice. After entering the strange and fascinating world of ontology, however, my position changed entirely. With an already established career in education, my awareness of constant changes in public opinion about best practice in education had made me sceptical about objective truths. My shift from adopting a somewhat behaviourist approach of teaching to using an eclectic teaching style, influenced by positive psychology and social psychology, had already laid the foundations for an interest in social constructionism. Although the realms of ontology and epistemology were often intellectually challenging and sometimes frightening, I was eventually comforted by a greater understanding of my own position and worldview. I found this to be one of the most enlightening parts of the research process; I realise from conversations with colleagues and fellow trainees that this is unusual. I can honestly say, however, that this worldview guided me through the rest of the research journey.

5.7.2 Acknowledging my own beliefs through the research process

I have always been interested in MH and wellbeing and noticed early on in my career that psychological wellbeing impacts every aspect of life from relationships to academic achievement. An area that I needed to develop was my understanding of the language around MH and the different constructs associated. Through further reading my belief that wellbeing is a continuum, with no clear cut points at which someone could be considered to have good or bad MH, confirmed my alliance with a social constructionist view of MH. I became sceptical about the statistics around MH difficulties and this made me question whether my research was relevant; however, my experiences on placement confirmed the need to reflect on the differing views of the role of EPs in supporting MH and wellbeing in schools. I also related to the idea that MH is everyone's business. Whilst I believe that it is impossible to carry out research without being influenced by one's own beliefs, I attempted to ensure the semi-structured interviews were focused on the interviewee's views by using the schedule and consciously responding in a curious and non-

judgemental way. My research journal helped me to reflect on my responses during the interviews so that I was able to further improve my interview style and become more skilled in achieving a good balance between exploring new directions of the conversation and keeping to the interview schedule. I was aware of feelings of professional defensiveness when interviewing the SENCOs, particularly when they expressed the view that they did not consider MH and wellbeing as part of the EP role. However, I was able to put aside these feelings by using the principles of attuned interaction and being curious to explore their views.

5.7.3 Impact of the research on the EP I want to be

Whilst at University I experienced a universal belief amongst the trainee EPs that the MH and psychological wellbeing of CYP is prominent in their drive to becoming an EP. I have enjoyed learning about and practicing therapeutic approaches such as SFBT, family systemic therapy and CBT. When attempting to put these skills into practice on placement, however, I found that there is a dissonance between espoused EP practice and real world EP practice. This is in part due to the scale of the workload meaning that there is little time for reflection, planning, delivering and evaluating interventions. The pressures on schools also mean that they are often not in a place to openly explore or take up any offers of organisational change projects or other larger scale systems work. All of these barriers to EPs offering support for MH and wellbeing in schools have been evident in my own practice and this has strengthened my desire to be an EP able to sow the seeds of positive psychological wellbeing in all the activities with which I engage. I am aware that a future challenge will be holding this value true when faced with a high demand of statutory work and a large number of schools to support. With social justice being another personal and professional core value, I have always wanted to work within a LA as I believe this to be most effective way to ensure that vulnerable CYP are given the same opportunities for support. With LAs currently shrinking, however, I will be faced with the prospect of more appealing EP posts being available outside of LA EP service. Rather than moving into the independent sector I would like to influence service delivery in the LA EP service.

5.8 Conclusion

This action research aimed to explore the views of EPs and SENCOs about the role of the EP in supporting MH and wellbeing in schools. The central research question posed was; how do EPs and SENCOs view the role of the EP in supporting MH and psychological wellbeing in schools?

The research was also guided by eight subsidiary questions which formed the main questions in the semi-structured interview schedules and aimed to explore examples of EPs supporting MH and wellbeing in schools, barriers to EPs engaging in this type of work and consideration of how the EP role could develop to meet the MH and wellbeing needs of whole schools. The views of four EP participants were sought using semi-structured interviews and TA identified seven themes with several subthemes in each: understanding MH and psychological wellbeing; school values and ethos; challenges to EPs working in the field of MH and wellbeing; differing perceptions of the EP role; general aspects of the EP role; examples of EPs supporting MH and wellbeing in schools; vision for EPs supporting MH and wellbeing in schools. The findings suggest that EPs understand the links between wellbeing and achievement and value the importance of adopting a systemic approach that considers the impact of environmental factors on wellbeing. EPs wished to support the MH and wellbeing of both CYP and staff and viewed it as part of their role. However, they were aware of the barriers to engaging in his type of work, which could have wide-reaching implications for practice. The EPs gave examples of MH and wellbeing support that they had given to schools at an individual, group and whole school level. The EPs identified a focus on emotional wellbeing that was threaded through all their duties, but acknowledged that this focus was not always recognised or understood by other professionals or service users. With an orientation to solutions, the EPs were able to suggest ways in which the service specifically, and profession more generally, could increase their support for MH and wellbeing in schools.

The views of three SENCOs were sought also, using semi-structured interviews and TA to identify five themes: what impacts wellbeing in schools; scope of the SENCO/INCO role; other professionals supporting MH and wellbeing; SENCOs' understanding of the EP role; challenges to EPs working in the field of MH and wellbeing. The finding suggest that there are many different factors that have an impact on the MH and psychological wellbeing of CYP and staff in schools. The SENCOs reflected on the pressures of working in schools and how this affects staff wellbeing. They also identified a perceived lack of confidence in school staff to support the growing number of CYP who are experiencing MH difficulties. The SENCOs expressed similar values to the EPs about the importance of focusing on MH and wellbeing. Differences were found, however, in the perception of the EP role between the SENCOs and the EPs. The SENCOs had not previously considered the EP role to include MH and wellbeing within schools but rather carrying out assessment. Through questioning they were able to give examples of EPs providing wellbeing support, but this may not have been recognised as such at the time. The SENCOs called for clarity around the EP role and the activities that the EP service can offer. This has implications for practice and validates the perceived need for this research. SENCOs expressed that they would value more support from EPs to deliver therapeutic interventions and set up supervision

for staff in schools. They identified a need for more staff training around MH issues facing CYP and viewed EPs as being well placed to do this. A working party comprising the principal researcher and the three SENCO co-researchers explored the thematic maps and worked collaboratively to agree next steps, including ways in which the role of the EP in supporting MH and wellbeing could be communicated more clearly with other professionals.

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7. Appendices

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Appendix A: Trail of the Systematic Literature Search

Search date	15 th October 2015
Database	EThOs
Key words	“educational psychology” or “educational psychologist” and “mental health” and “schools”. Several different combinations.
Results	Between 0 and 26 Thesis found.
Comments	Only 2 thesis found about the role of the EP specific to mental health in schools. (Durbin 2010 and Fee 2011). Other thesis around specific interventions, or mental health in schools without EP element.
Search date	16 th October 2015
Databases	Academic Search Psyc Info, Education Research Complete, British Index, ERIC,
Key words	Educational psychology or educational psychologist AND wellbeing AND Schools
Results and comment	66 items found. However, 9 were not in the UK, 3 were duplicates, 5 were book reviews, 7 were about specific populations (such as Service families or refugee children) and two were about university students. Only 2 studies and 2 discussion papers were directly about the role of the EP.
Search Date	23 August 2016
Search Method	EBSCO Web
Databases	ERIC and Psych INFO
Key words	Educational psychology AND mental health AND schools
Results	121
Comments	Reading articles about mental health, there are many different words which can be used. Also wellbeing is written in several different formats (wellbeing, well-being or well being)
Advanced Search	Educational psychology AND Mental health OR “psychological well-being” OR wellbeing OR “well being”
Results	145
Comments	Most articles not about EP practice; more generally about psychological wellbeing in schools. As I am focusing on the role of EPs in schools I may need to include other databases.
Search Date	22 October 2016
Search Methods	EBSCO Web
Databases	British Education Index, Child Development and Adolescent Studies, CINAHL Plus, Educational Research Complete, ERIC, Psych INFO and Teacher Reference Centre.
Key words	Education* psychol* (SU) AND mental health OR wellbeing OR well-being OR well being AND school* (SU)
Results	343
Advanced Search Inclusion/Exclusion Criterial	Changed education* psychol* to (TI) – Reduced to 84 Peer reviewed journals only – Reduced to 38 Changed time from 1963-2016 to 2006-2016 – Reduced to 37
Comments	Many articles not about Educational Psychology practice (need to combine education* and psychol* in search). 6 articles outside UK. Some articles were not research-based e.g. book reviews,

	editorials or conceptual discussions. Many articles not applicable, too specific e.g. Service Families, Adopted Children, LAC.
Advanced Search	"Educational psychol*" (TI) AND mental health OR wellbeing OR well-being OR "well being" OR resilience OR emotional literacy (SU) AND children OR "young people" OR pupils OR students (SU)
Inclusion/Exclusion	Peer reviewed articles only 2006-2016
Results	43
Comments	Some duplicates, some not UK (South Africa, Australia). All abstracts read. 10 highly relevant. 2 of which were focused on School staff wellbeing and the role of the EP.
Advanced Search	"Educational psychol*" (TI) AND mental health OR wellbeing OR well-being OR "well being" OR resilience OR emotional literacy (SU) AND teacher* OR "support assistant*" OR "school staff" (SU)
Inclusion/Exclusion	Peer reviewed articles only 2006-2016
Results	3 (all of which had come up in previous search)

Appendix B: Literature Review Articles

Journal Article	Theoretical Orientation	Outline & research purpose.	Findings	Strengths & limitations
Atkinson, C., Corban, I., Templeton, J. (2011). Educational psychologists' use of therapeutic interventions: issues arising from two exploratory case studies.	Theoretical orientation is not clear or explicit in this paper. There is mention of the tension between EPs wanting to steer away from a medical model of practice and the concept of 'therapy'. This is not fully addressed.	Two small-scale qualitative research studies. Research questions: how are EPs using therapeutic interventions? What are the issues for EPs in delivering therapeutic interventions? Study 1: focus groups & interviews with EPs, TEPs and CPs. Study 2: questionnaire (n7) followed by semi-structured interviews (n4) with EPs only. Thematic analysis for both studies.	Identified themes and subthemes where organised through the use of a SWOT analysis. Strengths: EPs use a wide range of therapeutic interventions in a flexible way and at different levels; access to CPD and supervision; wide definition of 'therapeutic intervention'. Weakness: lack of therapeutic interventions with young children; schools not always aware that EPs offer therapeutic interventions; limited opportunities to use. Opportunities: New direction for EPs; possible greater future significance for therapeutic work; multi-agency working. Threats: anxiety over role definitions; work related to SEN procedures taking precedence; time limitations.	<ul style="list-style-type: none"> • These studies are a good starting point for exploring EPs use of therapeutic intervention – gap in the evidence-base. • Small scale studies. First study included a focus group containing 12 professional (2 assistant EP, 6 EPs and 4 CP). This may have been too large for all participants to have been able to express their views. There would also have been several power imbalances (researcher was a trainee, experienced EPs likely to have been more vocal than assistants. More professionals from EP service than those with clinical background).
Atkinson, C., Squires, G., Bragg, J., Muscutt, J., & Wasilewski, D. (2014). Facilitators and Barriers to the Provision of Therapeutic Interventions by	Theoretical orientation not explicit.	UK wide survey (both online and paper copies distributed) to examine use of therapeutic interventions and the facilitating factors and barriers. 455 EP respondents.	92% use therapeutic interventions as part of their current practice. 68.7% as part of assessment, 66% as part of consultation, 54.5% as part of systemic work. SFBT and CBT, PCP are the most reportedly used therapeutic intervention. Examined facilitating factors (access to training, service culture, personal interest etc.) and barriers (limitations of time allocation	<ul style="list-style-type: none"> • Raises question of what constitutes therapeutic intervention? • Important consideration of facilitators and barriers.

School Psychologists.			model, capacity, lack of training, lack of practice etc.)	
Boorn, C., Hopkins Dunn, P., & Page, C. (2010). Growing a nurturing classroom.	Ecosystemic approach. Using theories of attachment and psychosocial development.	A training programme presented by EPs for professionals working in 73 primary schools with the aim of promoting an optimal environment for learning and emotional well-being. The purpose of the research was to evaluate the training programme.	<p>Rating scales used in training evaluation questionnaire (0-5).</p> <p>All of the seven main sections received feedback from 4 to 4.5 when averaged from all training courses as shown.</p>	<ul style="list-style-type: none"> • Importance of whole-school ethos highlighted. • Limitation – some delegates received 1 day training while others received 2 days. • Rating scales used to measure effectiveness and impact. • Some qualitative feedback reported but not thematically analysed.
Dawson, J. and Singh-Dhesi, D. (2010). Educational psychology working to improve psychological well-being: an example.	Positive psychology	<p>Evaluation of 10 years of the Child Behaviour Intervention Initiative (CBII) in Leicester City. Referrals made by families to 3 teams of Family support workers, CAMHs specialists and EPs. Various interventions used as well as training & support given. Average of 6 sessions.</p> <p>Also review of TaMHS project in Leicester City.</p>	<p>Evaluated using SDQ.</p> <p>Pre and post testing scores completed by professionals were not statistically significant. Parental reports indicated statistically significant effects post intervention. 60% of parents saw a positive improvement in their child and over 60% see an improvement in family relations.</p>	<ul style="list-style-type: none"> • Self referral system ensures positive engagement in the interventions. • No qualitative evaluations or information presented. All pre and post measures were questionnaires and self-scaling. • Although the article discusses importance of whole school approaches, the TaMHS project focuses on 'identifying children who are at risk of developing mental health difficulties' which adopts a medical/within child model of wellbeing.

Durbin, N. J. (2009). Promoting mental health and psychological wellbeing in children: A socio-cultural activity theory analysis of professional contributions and learning in a multidisciplinary team.	<p>Social Model of Mental Health.</p> <p>Sociocultural activity theory framework.</p> <p>Research adopts a transformative paradigm.</p>	Activity Theory used to explore the sociocultural processes involved in multidisciplinary work to promote mental health and psychological wellbeing in children and YP.	The objects identified in the EP group: the strategic management of the multiagency team; providing multidisciplinary mental health training; providing group-work to build children's social skills, understanding and confidence; resolving the problems of individual children and their families through casework. As majority of activities for EPs were around 'teaching' children social skills, there was less emphasis on changing the context, significant others or school environment.	Purpose unclear: evaluative, explorative and transformative? Stakeholders wanted research to evaluate effectiveness of multi-professional working. Issues of commissioning.
Fee, J. (2011). An exploration of educational psychologists' views of their role with child and adolescent mental health and psychological wellbeing.	<p>Critical realist paradigm.</p> <p>Grounded theory.</p>	<p>Mixed methods quant-Qual.</p> <p>Questionnaire sent to EPs in three different LAs. Then six in-depth interviews.</p>	<p>72 EPs completed questionnaire. 83% of EPs felt they engaged in mental health interventions. 58% of the mental health work was conducted with other professionals.</p> <p>A model of meeting the psychological wellbeing needs of YP is proposed. Issues around training, supervision and opportunity were identified.</p>	<ul style="list-style-type: none"> • Good quality research with explicit ontological positioning and theoretical orientation. • Some questions on the initial questionnaire may have been difficult to answer (e.g. % of time spent...) resulting in large deviation of responses. • No consideration of wellbeing of school staff and the role of the EP. • Somewhat inward looking – views of EPs only.
Gibbs, S., & Miller, A. (2014). Teachers' Resilience and	<p>Attribution theory.</p> <p>Resilience.</p>	Examined teachers' attributions for the causes of children's misbehaviour, teachers' beliefs in their efficacy as classroom	By understanding teachers' attributions and efficacy beliefs EPs can support their wellbeing better. Evidences how applied psychologist contributed to the	<ul style="list-style-type: none"> • Children's behaviour is often cited as a source of stress for teachers and a challenge to their resilience. Is this placing the

Well-Being: A Role for Educational Psychology.	Efficacy.	managers of children's behaviour as well as how such beliefs may be supported and enhanced.	professional wellbeing and resilience of teachers through consultation and interventions.	'problem' in the hand of the children with 'behaviour difficulties'?
Greig, A. (2007) A framework for the delivery of cognitive behaviour therapy in the educational psychology context.			Brief overview of the evidence-base for using CBT with children and adolescents at all levels: individual, group and systemic.	<ul style="list-style-type: none"> Not research
Hall, S. (2010). Supporting mental health and wellbeing at a whole-school level: listening to and acting upon children's view.	<p>Pupil participation – agency.</p> <p>Mental Health Promotion – reducing inequalities and in an empowering and participatory way.</p>	<p>Primary School bid for project around hearing pupil voice about emotional aspects of learning – commissioned EP service to run project.</p> <p>Focus groups with children aged 5-11. Explored features of their school that promoted or demoted mental health and wellbeing. Used Ten Element Map MacDonald and O'Hara (1998) to structure focus groups.</p>	<p>Themes emerging from the focus groups: environmental quality; self-esteem; emotional processing; self-management skills and social participation.</p> <p>Future directions - pupils moving from 'participating' to becoming 'co-researchers'. Parent voice being sought.</p>	<ul style="list-style-type: none"> Ten Element Map was over 10 years old when research took place, however, this was justified in relation to using a systemic approach to wellbeing in schools referring to current legislation and guidance. The article does not detail how the focus group data was analysed and themed.
Hughes, N.K., & Schlösser, A. (2014). The effectiveness of	<p>Positivist stance.</p> <p>Quantitative systematic review.</p>	13 papers examining the effectiveness of NG where considered. NGs based on work of EP Boxhall (2002). Reparative attachment experiences in	<p>Six studies – classic NG</p> <p>Four studies – part time NG</p> <p>One study – mixed. All studies used Boxall Profile some also used SDQ.</p> <p>Two studies – case studies.</p>	<ul style="list-style-type: none"> Qualitative studies removed from review. Meta-analysis could not be conducted due to different methodologies.

nurture groups: a systematic review.		school. Questionnaire data was synthesised and analysed.	Evidence for the effectiveness in Primary aged children is good (improvement found in all BP stands). Less evidence for secondary aged children. 5 out of the 6 studies that used SDQ found significant improvements.	<ul style="list-style-type: none"> Only one study did longitudinal follow-up with varied finding (some strands continued sig improvements while others relapsed).
MacKay, T. (2007). Educational psychology: The fall and rise of therapy.		Poses the question: 'Is therapy for mental health issues an 'educational' concern?' p.11	Four reasons for the fall of use of therapy; the reconstruction of educational psychology, increasingly demarcated professional boundaries, the focus on education and the impact of legislation. Atrophy of therapeutic skills as a result of increase statutory assessment and report writing. Suggested reasons for the recent rise of use of therapy; a historically inevitable process, the rise in mental health problems in childhood, the establishment of an evidence base for psychological therapies and a re-examination of roles and boundaries in applied psychology.	<ul style="list-style-type: none"> Not research
McQueen, C., & Hobbs, C. (2014). Working with parents: Using narrative therapy to work towards genuine partnership.	Drawing on a social constructionist ontology. Narrative therapy. Activity theory.	Practitioner research. Explores power differentials when EPs work with parents.	6 x 1 hours sessions in a building separate to the school. Plus preparatory session at the school. Film clips and audio used with TEPs; 'outsider witness practice' to thicken the stories.	<ul style="list-style-type: none"> Research only able to report work with one couple. Another parent took part but did not want content of conversations to be shared for research purposes. Powerful, personal and positive narrative about a couples' perceptions of parenthood. Confirmation that narrative therapy can be used to promote

				respectful and collaborative partnerships with parents.
Miller, R. (2016). An exploration of Clinical Psychologist and educational Psychologist constructs of mental health in the context of secondary school aged children.	Critical realist epistemology. Qualitative methodology. Underpinned by positive psychology and ecological systems theory.	Exploration of the constructs of 6 EPs and 6 CPs around mental health in secondary school aged children. Qualitative, semi-structured interviews thematically analysed. Two thematic maps emerged.	EPs and CPs construct MH differently. EPs on the whole adopt a systemic approach and lack experience/training in specific MH needs. CPs apply their knowledge and experience to create scripts around specific MH needs. However, both EPs and CPs espouse to adopt social constructionist approach to MH. The research also found professional defensiveness between EPs and CPs and misunderstandings about each other's roles in relation to MH. Implications for EP training to include a focus on MH.	<ul style="list-style-type: none"> The notion of MH constructs is thoroughly explored and the differing constructs created by different professionals is an important and unique aspect of MH research. Although this research attempted to adopt a systems approach of mental health in schools, the title focuses on 'secondary school aged children' rather than the school context as a whole. The semi-structured interview did not invite discussions around school staff MH and wellbeing. "Future research could include a participant group of school staff, exploring their needs and expectations in working with practitioner psychologists, and understanding MH." (p.121)
Noble, T., & McGrath, H. (2008). The positive educational practices	Underpinned by positive psychology. Also influenced by humanistic psychology, CBT,	Not a piece of research Framework is based on the five foundations of wellbeing: social and emotional competency, positive emotions, positive relationships, engagement	Promotes the shift from deficit model to a preventative wellbeing model.	<ul style="list-style-type: none"> Whilst it is published in a British Journal (BPS) the authors are based in Australia. Mentions lots of interventions used in Australian school such as Bounce Back.

framework: A tool for facilitating the work of educational psychologists in promoting pupil wellbeing.	positive young development approach. Seligman's five pillars of wellbeing.	through strengths and a sense of meaning and purpose.		<ul style="list-style-type: none"> Show little understanding of the work of EPs in the UK and the barriers to following a wellbeing agenda.
Osborne, C., & Burton, S. (2014). Emotional Literacy Support Assistants' views on supervision provided by educational psychologists: what EPs can learn from group supervision.	The theoretical underpinning of their study is not explicit/clear in the paper.	Questionnaire completed by 270 ELSA's to gain their views about group supervision provided by EPs. Quantitative (rating scales) and qualitative (answers to open-ended questions) data were collated.	Supervision sessions were perceived to be helpful (mean rating of 4.38). ELSAs felt that the group size (93%), length (95%) and frequency of supervision (95%) was appropriate. 7% of ELSAs said that the supervision did not meet their needs; further questions identified that some wanted individual support, some wanted more group discussion time and some wanted more experienced ELSA in their group. ELSA generally in agreement that supervisors fulfilled their roles. 17% felt that the supervisors could have done more. ELSA who knew the EP outside supervision (from other work in school) felt that this enhanced their relationship.	<ul style="list-style-type: none"> Although 43% response rate for ELSAs is high for this type of research, it could be argued that those who chose to respond may have done so because supervision was either very good or bad at meeting their needs. The sample may provide a skewed picture of the total ELSA population. It was interesting reflecting on the dual role of the EP, working in schools with staff and children and supervising ELSAs. ELSA appreciated when the EP had worked directly with the children brought to supervision. EPs views were not sought in line with the view that supervision is a reciprocal process.
Pugh (2010) Cognitive behaviour therapy in schools: the role	CBT and solution orientated thinking. EP role to question the	Not a piece of research. Discussion around the increase in educational psychology work	Commercialisation of manualised interventions questioned. Intervention integrity/fidelity questioned.	Advantages of democratisation of psychological intervention; more children receiving support. Disadvantages include the

of educational psychology in the dissemination of empirically supported interventions	appropriateness of quantitative research when evaluating CBT interventions and strict adherence to manualised interventions.	involving therapeutic interventions. Recent push for evidence-based practice. Question importance of RCT and strict adherence to manualised interventions. Market forces – commissioning.	EP skilled generalists – skills not best utilised by following manuals or sticking to one method/theoretical approach. Invites reflection on the EP professions' current involvement in CBT and consider how it might add value in existing systems.	changing identity and function of established psychology professionals. <ul style="list-style-type: none"> Educational psychology risks drifting from the provision of therapy services unless its role within the marketplace is adequately addressed
Rait, S., Monsen, J.J., & Squires, G. (2010). Cognitive Behaviour Therapies and their implications for applied educational psychology practice.		Evaluative Meta-analysis of REBT and CT.	Ellis's Rational-Emotive Behaviour Therapy (REBT), and Beck's Cognitive Therapy (CT) reviewed in relation to EP practice. Meta-analysis of both REBT and CT indicated good effect sizes for all age groups 5-18. Interestingly biggest effect size seen in younger age range. Discussion around barriers to EPs delivering CBT (other professionals able to deliver more cost effective, EPs have time constraints and limited resources). This article suggests that EPs are well placed to support school staff in delivery CBT and influencing whole-school approaches	Comparing meta-analysis carried out over 10 years apart. REBT meta-analysis Gonzalez et al. (2004) and CT meta-analysis Durlak et al. (1991) No matched control groups. No follow up over time Thorough discussion of implications for EPs and clear rationale for future work (training and supervision for school staff to deliver and evaluation of CBT programmes to add to the evidence-base).
Roffey, S. (2015). Becoming an agent of change for school and student well-being.	Routed in Positive Psychology. Takes an ecological and optimistic position on change.	Not a piece of research	Educational Psychologists are well placed to sow the seeds of well-being at a universal level in schools through conversations, consultations and advocating for social and emotional learning.	<ul style="list-style-type: none"> Not research

Roffey, S. (2016). Building a case for whole-child, whole-school wellbeing in challenging contexts.	Ecosystemic – resilience is an interaction between the individual and their environment.	Not a piece of research but it does outline evidence/figures of adverse life experiences for children in the UK.	Outlines the risk factors facing many children in the UK with figures and their sources. Chronic long-term stressors appear to be more damaging to mental health than sudden acute ones. Suggested protective factors that can be harnessed at school: supportive relationships; high expectations; sense of belonging; agency; social and emotional learning; working collaboratively with families.	<ul style="list-style-type: none"> • Makes a good case for making well-being a whole-school agenda. • Gives a somewhat deterministic view of child and young people who have experienced difficulties such as poverty, family breakdown etc.
Rothia, D., Leavey, G., & Best, R. (2008). Recognising and managing pupils with mental health difficulties: teachers' views and experiences on working with educational psychologists in schools.	Grounded theory.	Qualitative study. Exploring the views and experiences of teachers. IPA used to analyse data.	30 teachers interviewed (19 women and 11 men, mix of experience and additional roles, mix of school types). IPA identified four themes: EP service-related issues; relationships with EPs; issues related to the impact on pupils of the involvement of EPs; the role and function of EPs as perceived by teacher. Teachers perceive that EPs are not specialists in mental health.	Very interesting subtheme around exclusion and 'containment'. Clearly shows teachers' frustrations about working with pupils with mental health difficulties and the support (lack of) they receive. Highlights need for a more joined up approach (health, education and social care). Concludes with a call for a bridging of the service boundaries to ensure effective joint working.
Sharrocks, L. (2014). School staff perceptions of well-being and experience of an intervention to promote well-being.	Systemic and organisational approach.	A group intervention run by EPs for school staff called Chill and Chat to support their wellbeing. Qualitative; questionnaires and focus groups. Thematic analysis.	Focus groups – great deal of discussion about the acceptance (or not) of talking about well-being at school. 'Staff reported perceived improvements in relationships and staff cohesiveness, however tensions remained around being seen to cope' p.33. Discussed importance of not letting 'good mental health' become another standard for teachers to meet.	Poor response rate for questionnaires (29% before intervention and 39% after the Chill & Chat sessions). Found that staff who had attended the well-being intervention felt they were better able to deal with incidents related to children's emotions in the classroom. Implications for EP role discussed.

Squires, G. (2010). Countering the argument that educational psychologists need specific training to use cognitive behavioural therapy.	Phenomenological psychology. Personal construct psychology. Rational Emotive Behavioural Therapy.		Argues that EPs can deliver CBT in schools or supervise those who are delivering it. Argues that EPs already have the necessary skills and training to engage in CBT	Not research. Interesting discussion about the links between the medical model and use of CBT. As EPs usually adopt a social model of emotional and behavioural difficulties, the language of 'diagnosis' and 'treatment' can sit uncomfortably with them.
Wood, J. (2016). Supervision for school staff: What is valuable about Solution Circles?	Critical realist perspective. Underpinned by Solution Orientation thinking and self-efficacy theory.	Exploring the mechanisms of solution circles. 5 Solution Circles in 3 schools. quant – QUAL methodology. Use of self-report questionnaires both before and after the Solution Circles. Then semi-structured interviews with the staff facilitators, who had been trained by TEP.	There was no statistical difference between the pre and post self-efficacy, resilience and anxiety measures. However there was a small effect size for self-efficacy. Themes emerging from the thematic analysis of verbal feedback in the 5 th circle and the semi-structured interviews were as follows: structure; a need to talk; feeling like a team; "what are you lot doing down there?"; individual characteristics; support; dealing with what's in the field. Mechanisms put into three areas – support, people, school context.	Whilst the research was exploratory, consideration was given to the aims/outcomes of the solution circles. By 'exploring' the participants self-efficacy, resilience and anxiety both before and after the solution circles, it could be argued that the research is measuring value. Quantitative data showed no statistical difference, however the sample size was small (n=16)

Key

EPs use of interventions in general

EPs use of interventions to support children and young people's wellbeing

EPs use of intervention to support parents' wellbeing

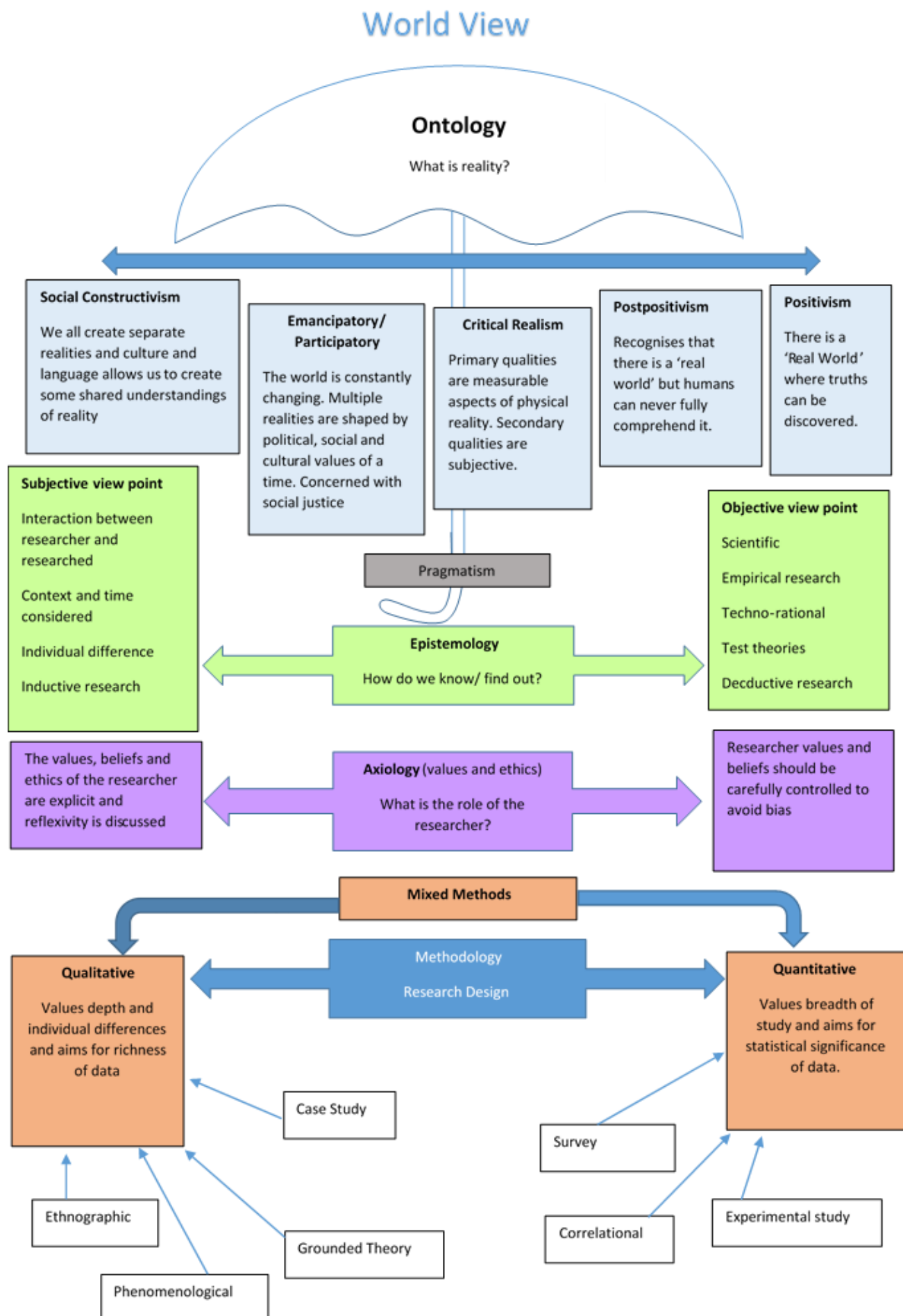
EPs use of intervention to support school staff wellbeing

EPs training around wellbeing

EPs working in multi-agency teams

EPs contributing to whole-school approach to wellbeing

Perceptions of EP role



Appendix D: Pre-interview activity

Pre-interview activity

Spend no more than 10 minutes completing this mind map/spider diagram to show your understanding of what mental health and wellbeing in schools means to you. Just add words or pictures/doodles. There is no right or wrong answer; this activity is just to stimulate ideas before our interview.



SEMI-STRUCTURED INTERVIEW SCHEDULE

Opening queries:

- A brief summary of current job role? - Length of time in current role? - Previous job roles?
Were these in the same or a different local authority (no need to provide details of this).

(RQ 1) Do EPs and SENCOs believe mental health and psychological wellbeing in schools is part of the EP role?

- *“Do you think that promoting mental health and psychological wellbeing in schools is part of the role of the EP?”*
- *“Why do you think EP are/are not best place to focus on mental health and psychological wellbeing?”*

(RQ 2) What value do EPs place on mental health and psychological wellbeing work in schools?

(RQ 3) Do SENCOs value mental health and psychological wellbeing work from EPs in schools?

- *“With regard to the role of the EP and the scope of their duties, how important do you think mental health and psychological well-being work in schools is?”*
- *“What value do you think EPs/SENCOs give to this type of work?”*

(RQ 4) What are the examples of mental health and psychological wellbeing support in schools from EPs at an individual, group and systems level?

- *“Can you give me any examples of mental health and psychological wellbeing support that you have given/been given at an individual level?”*
- *“Are there any types of group interventions which focus on mental health and wellbeing that you have delivered/have received from EPs?”*
- *“Have you supported mental health and wellbeing at a whole schools level?” – EP*
- *“Have you received any whole school work around mental health from an EP in your school?” - SENCO*
- *“Are there any examples of EPs supporting the wellbeing of school staff?”*

(RQ 5) Are there any barriers to EPs offering this type of work?

- *“Do you think there are any barriers to EPs offering mental health and wellbeing work in schools?” If yes, “what are the barriers?”*
- *“How do you think these barriers could be overcome?”*

(RQ 6) How do EPs and SENCOs think the role of the EP could develop further to include mental health and psychological wellbeing?

- *“How do you think the EP role could develop further to include the mental health and wellbeing of everyone in schools?”*

(RQ 7) What training, skills and resources do EPs need in order to deliver this wellbeing agenda?

- *“What skills and training to EPs need in order to deliver a wellbeing agenda in schools?”*

Cooperative Inquiry questions

- *“What would you like to see happen as a result of this research?”*
- *“Who should we share the findings with?”*



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Principal Researcher

Rachael Andrews
Trainee Educational Psychologist
Email: rachael.andrews@
Telephone: [REDACTED]

Consent to participate in a research study

The purpose of this letter is to provide you with the information that you need to consider in deciding whether to participate in the research study. This research is being conducted as part of a Doctorate in Child and Educational Psychology degree at the University of East London.

Research title

Reaching for a shared understanding: Exploring the views of Educational Psychologists (EPs) and Special Educational Needs Coordinators (SENCOs) about the role of the EP in supporting mental health and psychological wellbeing in schools.

Research description

The aims of this research are to explore the views of EPs and SENCOs about the role of the EP in supporting mental health and psychological wellbeing in schools at an individual, group and whole school level. The research will involve elements of co-operative inquiry; this means that the participants will be invited to become co-researchers in order to produce practical recommendations and outcomes as a result of the exploration. The research will involve the participants sharing their views during a semi-structured interview and contributing to a working party to look at themes identified and discuss next steps.

Time commitment and expectations

It is acknowledged that both EPs and SENCOs are very busy and the researcher wishes to be transparent about how long each stage of the research will take to ensure fully informed consent is gained from volunteers. The following table outlines the timings for each of the stages:

Stage	What?	When?	With whom?	Where?	For how long?
1	Semi-Structured interviews	Oct 2016	1:1 with principle researcher	Location of your choice	45mins – 1 hour
2	Working Party*	Autumn Term 2016	3 other EPs and 4 SENCOs	[REDACTED]	1 hour

*Lunch will be provided

Confidentiality/Anonymity of the data

At stage 1, the semi-structured interviews will be audio recorded. The recordings will be securely stored on an encrypted laptop and will be heard by the principal researcher and a professional transcriber only. The transcription will use pseudonyms rather than real names in order to ensure participants anonymity. Once the transcriptions are complete, the audio recordings will be permanently deleted. The researcher hopes to publish the research towards the end of 2017 and the anonymised transcripts will be kept for further analysis or future reference.

This research aims to explore the views and experiences of EPs and SENCO and therefore has a qualitative methodology. As such, the researcher wishes to make explicit that the views expressed in the interviews will be shared as part of a doctoral thesis and will therefore not be confidential. However, the researcher wishes to reassure possible participants that all the views expressed will be anonymised in all the written documentation.

Who will the data be shared with?

The anonymised data may be shared with the researcher's Director of Studies. An analysis of the data, in the form of themes with some examples of anonymised transcript extracts, will be shared with all the other participants in line with the cooperative inquiry nature of the research. It is also hoped that the research will be disseminated to a variety of audiences including but not limited to; EP services, schools and the University of East London. Once included in the write up, the data analysis will form part of the researcher's thesis which will become a public document.

Disclaimer

You are not obliged to take part in this study and should not feel coerced. You are free to withdraw at any time without disadvantage to yourself and without any obligation to give a reason. Should you choose to withdraw from the study after the data analysis has started the researcher reserves the right to use your anonymised data in the write-up of the study and any further analysis that may be conducted by the researcher.

Please feel free to ask any questions. If you are happy to continue you will be asked to sign a consent form prior to your participation. Please retain this invitation letter for reference.

If you have any questions or concerns about how the study has been conducted, please contact the researcher's Director of Studies (Dr. Helena Bunn, School of Psychology, University of East London, Water Lane, London E15 4LZ. Email: h.bunn@uel.ac.uk)

Or

Chair of the School of Psychology Research Ethics Sub-committee: Dr. Mary Spiller, School of Psychology, University of East London, Water Lane, London E15v 4LZ (Telephone: 020 8223 4493. Email: m.spiller@uel.ac.uk)

Thank you in anticipation.

Yours sincerely,

Rachael Andrews

Trainee Educational Psychologist



UNIVERSITY OF EAST LONDON

Consent to participate in a research study

Reaching for a shared understanding: Exploring the views of Educational Psychologists (EPs) and Special Educational Needs Coordinators (SENCOs) about the role of the EP in supporting mental health and psychological wellbeing in schools.

I have read the information sheet relating to the above research study and have been given a copy to keep. The nature and purposes of the research have been explained to me, and I have the opportunity to discuss the details and ask questions about this information. I understand what is being proposed and the procedures in which I will be involved have been explained to me.

I understand that data from the research will be anonymised in order that any extracts from the data set will not be linked to me. Only the researcher involved in the study will have access to identifying data. It has been explained to me what will happen once the research study has been completed.

I hereby freely and fully consent to participate in the study which has been fully explained to me. Having given this consent I understand that I have the right to withdraw from the study at any time without disadvantage to myself and without being obliged to give any reason. I also understand that should I withdraw, the research reserve the right to use my anonymous data in the write-up and in any further analysis that may be conducted by the researcher.

Participant's Name (BLOCK CAPITALS)

.....

Participant's Signature

.....

Researcher's Name (BLOCK CAPITALS)

.....

Researcher's Signature

.....

Date:



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TRANSCRIPTION INSTRUCTIONS

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Verbatim Transcription

This study requires full verbatim transcription. As well as preserving the actual words which were spoken, extra verbal material captured such as the speaker's use of intonation, pauses, rhythm and hesitation, should be recorded. This keeps some of the additional meaning that was conveyed in the original interview, thereby providing contextual information as to the manner in which words were spoken. The words of the researcher must also be included so that the conversational nature of the interviews is reflected.

General notes:

- Please insert page numbers at the bottom of each page.
- Please identify the interview and the respondent separately. Use I: for interviewer and R: for the respondent. For example:

I: Thanks for chatting me today. Please could you introduce yourself?

R: Sure, my name is...

I: Great, and could you describe your current job role?

- Please include what the interviewer says, with the one exception of 'back channel utterances', i.e. where I can be heard in the background saying words such as "right", "yeah" or utterances such as "mmmhmmm" whilst the interviewee is speaking. I tend to do this a lot, in order to encourage the respondent to continue speaking and reassure them that they are being listened to. It is not necessary to break up the respondent's speech by including them. That said, I occasionally get excited and say things like "oo, interesting!" in such a way that might then shape the response of the respondent. If this seems to be the case, please do include my "utterance". I appreciate that this is likely to be a matter of opinion so please do use your own discretion.
- Please use punctuation as for normal written prose. Grammar should not be altered or "tidied up". Please do not use 'eye spellings' (e.g. "enuff" for "enough").

Things to include in full:

- Unfinished questions or statements that trail off – please indicate these with ellipses (...), for example: "I'm really not sure why I did choose to go down that route, or what the alternative would have been, perhaps..."
- False sentence starts o Repeated phrases, words, statements or questions o Discussion that continues after the interview appears to be 'formally' finished
- Non-lexical utterances or 'fillers' such as 'umms' and 'errs' and 'uhs' o Hesitations and Pauses – please indicate these with ellipsis (...), for example: "why do I think that... well... let me think... umm..."
- To indicate an exclamation of surprise, shock or dismay, please use the standard exclamation mark o Emphases – indicate any emphasis on a word or phrase by putting it in italics.

Things to include in brackets:

- Noises in background – for example: (loud banging) or (door slams) or (muffled voices)
- The tone of the respondent. This will again need to be at your discretion - I don't anticipate there being many changes in tone, but where it seems relevant it would be great if you could include any comments on mood, feeling, passion, emotion and paralinguistic – for example: (laughs loudly) or (mumbles slowly) or (sounds angry) or (sighs) or (falters slightly)
- Unclear words or phrases must be marked where they occur within the text by placing the word "inaudible" in brackets and in bold, e.g. (**inaudible**). Please do not guess at anything which you cannot understand.

Confidentiality and anonymity

The interviews that you will be listening to are confidential. Please keep all the research information shared confidential by not discussing or sharing the content of the interviews in any form or format (e.g. audio file, CDs, transcripts) with anyone other than the researcher. It is important to keep all research information in any form or format (e.g. audio file, CDs, transcripts) secure while it is in your possession and return all research information in any form or format to the researcher when the transcription tasks are complete. After consulting with the researcher, please erase or destroy all research information in any form or format regarding this research project that is not returnable to the researcher.

Yours sincerely

Rachael Andrews

Trainee Educational Psychologist

Thematic Analysis

EP Interview 1

Line	Raw Data	Initial Code	themes
1	I: So the first bit that we wanted to cover was about your role; what you do		
2	currently, how long you've been in post and what you did before that?		
3	R: Ok so I'm currently EP Team Manager for [REDACTED]. I have been		
4	in that role for err... a year and a half. Previously an EP over in [REDACTED] and		
5	prior to that [REDACTED] etc. so I've been an EP in [REDACTED] for 13	<i>Years of experience</i>	EP values and
6	years.		knowledge
7	I: Oh wow a really long time.		
8	R: Yes and as part of those 13 years I guess probably seven of those I was	<i>Specialist role</i>	
9	senior specialist for behaviour.		
10	I: Oh right		
11	R: so that's been my remit. For part of those seven years I was in the	<i>Behaviour support team</i>	
12	behaviour support team (BST) so left the educational psychology service was		
14	the EP and behaviour support team with a primary mental health worker, two		
16	family workers and two advisory teachers and then when that ...we had five of		
18	those teams and then they ceased to exist and then came back. But always		
	been an EP.		
	I: and what did you do before you were an EP?	<i>Role other than EP</i>	
	R: I was a teacher locally.		
	I: Secondary school or primary?		

20	R: Primary. Year 1 for four years.		
	I: Four years. I taught for four years as well.		
22	R: Loved it actually. Really really enjoyed it. So locally over in [REDACTED].		
	I: Lovely thank you. So you've always worked in [REDACTED]?		
24	R: Yes		
	I: Lovely so before I go into question 1 we'll have a little look at the activity		
26	sheet that I asked people to do this to start thinking about what mental health		
	and wellbeing in schools means to them. Um.. So some of the things that you		
28	said were about staff being happy and enjoying their job, children who are		
	relaxed and having a place or a person to go to. Laughter that was nice. I		
30	liked the fact you put that in there openness about difficulty. What made you		
	think of those things?		
32	R: I think when I looked at this I did it quite quickly and I did the first thought in	<i>Emotionally healthy school</i>	School values and ethos
	my head but I thought if I walked into a school and it was an emotionally		
34	healthy school what would I see? What would I feel and what would I see? It		
	would be those and I think it would be the same for an emotionally healthy		
36	team I would see all those things so I guess I was looking at the ideal.		
	I: I think that's really nice. I like that emotionally healthy school. Because I		
38	think what I found tricky in the beginning with the research is all the language		
	around it.		
40	R: Yes and I tend to use emotionally healthy or emotional wellbeing,	<i>Language around MH</i>	Different constructs of
	emotionally well because I think that sits better. It doesn't feel so kind of		
42	clinical necessarily.	<i>Avoiding clinical language</i>	Different constructs of MH & language used

44	I: and that was something I grappled with initially because I was wondering whether or not to use the term mental health.	<i>Term MH</i>	School values and ethos
	R: The thing is it is in the Code of Practice, isn't it?	<i>MH in Code of Practice</i>	
46	I: Exactly that was my thinking and the fact that in our reports we have to talk about it and the move away from talking about behaviour towards mental	<i>Movement away from behaviour to MH</i>	
48	health. But I kind of thought of it as being the same thing as wellbeing; emotional wellbeing.		
50	R: I think it is and when the Code of Practice came out I was surprised that mental health wasn't emotional health and wellbeing. Obviously it's something	<i>Language around MH</i>	
52	that's stayed with and that's fine. We all know what that means, don't we?	<i>Difficulty with term MH</i>	
	Well that's what I came up with literally in my head, that is what I would see if I	<i>Emotionally healthy sch</i>	
54	went to an emotionally health school.		
	I: um... I really like that. Thank you very much. It will be interesting to see the		
56	different opinions in that kind of....		
	R: Yes because it is quite open task. Because if I did my first reaction it's		
58	probably the best thing. If I do what I first think.		
	I: OK lovely. So the first question is around one of my research questions. So	<i>Wellbeing is part of the role of EP</i>	
60	do you think that promoting mental health and wellbeing in schools is part of the EP role.		
62	R: Yes I definitely think that. (laugh)		
	I: Why do you think that EP is the best place to focus on wellbeing in schools?		
64	R: That is an interesting question because I wouldn't say we are best placed in that we're the only people that could do that but I think we are well placed for a	<i>Not best placed, well placed.</i>	

66	number of reasons. I think we get to know our schools really well and even	<i>Knowledge of schools</i>	Other services offering
68	with the new model we are using for consultations I think we are still getting to	<i>Limitations of consultation model</i>	MH & wellbeing support
70	know the kinds of things our schools are bringing to us so we have a picture	<i>Picture about what's happening in schs</i>	EP values & knowledge
72	about what is happening in our settings. Um... I think obviously due to the	<i>Psychological knowledge of EPs</i>	Service Delivery
74	psychological knowledge that we have we should be professionals who are involved in emotional health and wellbeing. Um...I think also our knowledge of	<i>EP Knowledge of child development</i>	EP values & knowledge
76	children and developmentally, so knowledge kind of individuals but also of the	<i>Systems around CYP</i>	
78	systems around those individuals means we are well placed to have a really	<i>Good impact</i>	
80	good impact.	<i>Not best placed, well placed</i>	
82	I: I like that well placed rather than best placed.		
84	R: Yes because I think there are probably other practitioners who are even	<i>CAMHS workers</i>	Other services offering
86	better placed like CAMHS workers for example but I think we are well placed.		MH & wellbeing support
88	I: Yes lovely. What value do you place on mental health and wellbeing in schools?		
90	R: I would say it's my main priority. I think that is probably partly to do with my	<i>Main priority</i>	
92	previous experience. So I've always been focussed on social and emotional	<i>Previous experience</i>	
94	kind of skills and development but I would say a very high value because	<i>Focus on social & emotional skills</i>	EP values & knowledge
96	actually I don't think we can do anything else well unless the schools are	<i>Emotionally healthy schs</i>	
98	emotionally healthy. Unless we have a school that is willing to take on board	<i>Schs willing to take on board wellbeing priority</i>	School values & ethos
100	what we're talking about and aren't stressed I don't think we can do the other		
102	things very well.		Schools' capacity to
104	I: Yes brilliant. With regards to the role of the EP what do you think a SENCo's		support wellbeing of
106	views might be about the wellbeing agenda?		CYP

	R: So not their view about us?		
90	I: Their views about us in terms of supporting wellbeing in schools.	<i>Different schs have differing views of EP role</i>	Perception of EP role by other professionals
92	R: I think it would depend on schools. In some schools where we have already been involved in terms of mental health and wellbeing obviously they will obviously associate us with doing that kind of work. I would say on the whole probably not. I think, as I said earlier, I think they think mental health straight to CAMHS. Often there is that direct link. I'm hoping that will change.	<i>Schs tendency to link MH with CAMH services. Hope for change</i>	Other services offering MH & wellbeing support
96	I: Yes me too. And I'm just thinking if we've covered all that.		
98	R: Can I just talk about a little bit about a CAMHS project that I'm part of? (Oh yes) so what we are doing at the moment. I am linking up with the CAMHS team; myself and [REDACTED], Team manager in [REDACTED] so we're the links to the CAMHS team and we are doing a pilot project so there are...	<i>Linking up with CAMHS</i>	Vision for EPs supporting MH & wellbeing in schools
100	correct me if I'm wrong... I think 12 schools around county, across the county I should say where CAMHS have identified – well actually the schools have volunteered to be part of the pilot project and what's going to happen is	<i>Consultation model</i>	EPs working with other professionals
102	CAMHS are going to roll out a consultation model with those schools taking on board what I have described as our consultation model they like that. So the aim really is for them to become less clinic based in the project any way and be more schools focussed so they will be in these pilot schools, they will be visible regularly literally in the setting. What that will look like in detail we are still working on and you might like to come to some of our meetings (yes definitely).	<i>Less clinic based more sch focussed</i>	Different constructs of MH
106	I've got one next Thursday but what we're doing is looking at whether they are going to use the consultation model in the same way we do where teachers	<i>Sharing knowledge/inviting</i>	EP values & knowledge
108		<i>Consultation model</i>	Service Delivery
110		<i>Self-harm</i>	

112	come in and say what they are concerned about and it could be about a pupil	<p><i>Hope for change</i> <i>Shifting how schs see</i> <i>mental health services.</i></p> <p><i>EP role to work with</i> <i>mental health services.</i></p> <p><i>Joint work with CAMHS</i></p> <p><i>Vision</i> <i>Uncertainty</i></p> <p><i>CAMHS commissioning</i> <i>EP service.</i></p>	<p>MH needs</p> <p>Vision for EPs</p> <p>supporting MH & wellbeing in schools</p> <p>EPs working with other professionals</p> <p>Vision for EPs</p> <p>supporting MH & wellbeing in schools</p>
114	CAMHS practitioners are then going to be working directly with the teachers in		
116	that way. So I'm hoping that this will really shift how schools see mental health		
118	services. I also think and you might or may not agree that we have that role,		
120	that we could do some of that work together. I've certainly picked up a lot of		
122	what I would call emotional health issues and I think we could be doing those		
124	jointly with consultations with CAMHS.		
126	I: Yes absolutely.		
128	R: That's my vision, Rachael. Whether it will actually happen I don't know.		
130	I: No I really like the sound of that. How did it come about that project?		
132	R: [REDACTED] who's the CAMHS commissioner that is something they've		
	been commissioned to do. She contacted the Educational Psychology service		
	and we've kind of run with it really.		
	I: Wow that is very exciting. I wasn't aware of that project.		
	R: Yes let me check my diary but I think it's next Thursday and it's here.		
	I: Oh brilliant.		
	R: If you're around but you're Monday, Tuesday, Wednesday.		
	I: I am but I will see if I can.		
	R: There are other meetings as well so just look in my diary and let me know.		
	I: Is it OK if I come along?		
	R: Of course they would love that.		

134	I: It sounds really exciting that project and maybe some of what I am doing could feed into that as well.		
136	R: I think it definitely could and some of their issues where for example some of their concern is around those children that teachers bring to the consultation that are known to clinic, there's a little bit of a grey area there (yes right)	<i>Consultation</i> <i>Grey area; CYP known to different services</i>	Need for clarity around professional boundaries
138	because there is a question if they are already known to clinic should they come to consultation so that is something that we are still looking at but it is exciting.	<i>Exciting</i>	
140	I: Yes really exciting but also if they are bringing more of a general issue that they want to talk about if it is around self-harm, anxiety, exam stress that kind of thing I think that could work really well if it's joint as well.	<i>Self harm/Anxiety/Exam stress</i> <i>Joint work with CAMHS</i>	EPs working with other professionals
142	R: and I do and one of the things [REDACTED] and I talked about was as a team looking at doing some sort of twilight sessions and one of them was around anxiety and we are thinking of perhaps doing that together.	<i>Training</i> <i>Anxiety</i> <i>Joint work with CAMHS</i>	EPs working at school level
144	I: Ooh it's really exciting. So some of this might actually feed over into some of the next questions. So what are the examples of mental health and wellbeing support in schools from EPs at the different levels so if we start at an individual level what sort of things have you been involved in?	<i>Exciting</i>	
146	R: Me personally or the team? Me personally. So previously as I don't now have a patch of schools but when I did have a patch of schools I did some CBT work with a year 9 pupil and that was around anxiety and attendance so that was quite a longer piece of work than I would normally do. We did CBT with	<i>CBT with individual CYP</i>	
148		<i>Anxiety</i>	EP's use of wellbeing interventions
150		<i>CBT with individual CYP</i>	
152		<i>Work with adults around CYP</i>	
154			

156	him and then on top of that we did CBT approaches type training with his key workers and so myself and a colleague did that in a secondary school.	<i>Always in the thread of my work</i> <i>Questions</i>	
158	Um... individually. I suppose in a way it's always in a thread of my work so I don't think I can specifically say apart from the CBT case but all the questions that I am asking, all the discussions I have that is always there so I am trying to	<i>Interventions</i> <i>Working systemically</i>	EP values and knowledge
160	draw out is this child feeling settled? or are they feeling worried? so that's always in my line of questions. In terms of interventions I'd like to think that		
162	then I share that with the schools and they then put in place you know the usual things like somebody to talk to at the beginning of the day, your "when to	<i>Giving schools the tools</i>	EPs working at school level
164	worry" kind of tools. Um... so I would like to think it is kind of always there really, Rachael.		
166	I: Yes that's a really nice way of saying it actually about having it always there in your work that you are using working with young people and I suppose it's	<i>Tools</i>	
168	about the way you talk to them, the questions you ask, the things you use. Is there anything in particular you can think of the tools you use?	<i>Solution focussed/</i> <i>Choice theory</i>	
170	R: Most of the questions that I tend to use as a practitioner are more sort of solution focussed type of approaches, sometimes a bit of choice theory so		EP values & knowledge
172	looking at that kind of sense of belonging, that kind of need for freedom, looking at what kind of areas of their life they feel content in really. It tends to	<i>Classroom observations</i> <i>Observation better than assessment</i>	
174	be those types of questions. Obviously observing them in their classroom. I tend to get a lot from observation rather than assessment. I think also and it is	<i>Wellbeing of teachers & parents</i> <i>Consultation</i>	Staff wellbeing
176	probably going onto the next bit when I'm talking to their teachers or their		EPs working with families

178	parents I always like to check in on their own wellbeing as well before they even start to have a consultation so that I know where they are.	<i>Systemic work</i>	EP use of wellbeing intervention (adults)
180	I: And it can be quite emotional I think when you are working with parents and teachers as well because the reason you have been called in is usually	<i>Tools</i>	
182	because things are a bit stuck and people are finding things difficult so usually there are emotions there.	<i>Circle of Adults</i>	
184	R: There are. I mean looking at the more kind of systemic bit although this is around individual pupils but a tool I love to use which I haven't used recently is	<i>Circle of Adults</i>	
188	Circle of Adults.	<i>Getting staff parents and CYP together</i>	EPs using of wellbeing interventions
	I: Oh I didn't know you used that.		
190	R: Circle of adults is like a map. Do you know the map kind of way of working?		
	So it is very similar and there is always two of you but I would sometimes do		
192	the graphic bits or I would take turns really but it is about getting all the staff		
	and sometimes parents and sometimes the young person and you've got nine	<i>Good impact</i>	
194	key questions with a huge graphic on the wall.		
	I: Oh it's a bit like PATH.		
196	R: Yes it's a bit like PATH. It's from Inclusive Solutions and they've got some lovely questions. It takes about an hour and a half but that's a method I've	<i>Working with adults around the CYP</i>	EPs using of wellbeing interventions
198	used to good effect.	<i>Working with parents</i>	
	I: Ooh that sounds lovely... and who would you do that with?	<i>Need for sensitivity when working with parents.</i>	
200	R: I would usually do that with another EP.		
202	I: Another EP and then who else would be doing it? Parents?		

204	R: All key staff. Probably for it to work well you need between 8 to 10 or 11 people. So we get all key staff in, teaching assistants, sometimes lunchtime assistants, parents if they want to come. I have found it easier not to do it with	<i>CYP present?</i>	
206	parents as some of the issues are quite sensitive and need to be handled in a different way. But yes with a high number of staff definitely.	<i>Open conversation with school staff. Questions</i>	
208	I: And with the young person present.	<i>Question</i>	
210	R: Sometimes or sometimes they are present for a bit of it but again I think it works at its best when you are with a staff group because you can really have that open conversation and one of the questions I love is say we are talking		EP values and knowledge
212	about Charlie “if you were on a desert island with Charlie what would that feel like?” I love that question because it takes them away from the school and it’s	<i>Question</i>	
214	a really powerful question actually.		
216	I: That’s really interesting.	<i>Reflection</i>	
218	R: And some people say it would be really exciting, we’d never be short of food, we’d have fun, we’d swim and others say I’d be terrified, I’d be bored, we wouldn’t talk so it’s a really good question. Even if I’m not using the Circle of Adults methodology that’s a question I use.	<i>Safe question Indirectly asking about how the adult feels about the CYP</i>	
220	I: I quite like that question as well because it makes you think. It’s not something that is going to come up and you can’t really prepare for it so you are going to reflect and think how would I feel?		
222	R: And it’s safe because what you’re not saying is directly what do you think about that child and you are saying it indirectly how do you feel about this child	<i>Taking them out of the school environment</i>	
224			

226	but you are saying it hypothetically and it's quite kind of fun and what would it be like on a desert island and you get that immediate ooh or oh and you know.	<i>How well is a CYP loved?</i>	EPs working with families
228	I: That is interesting then because you are thinking about other factors then because you are taking them out of the school environment.	<i>Academic performance</i> <i>How well is a CYP loved?</i> <i>Job enjoyment</i> <i>Reflection on action</i>	
230	R: Yes you're taking the child out and the adult.	<i>Exciting</i>	
232	I: So is the pressure of the school and the curriculum going to be taken away or is it about that relationship between them?	<i>Circle of Adults</i>	
234	R: And the other part of that and it is probably similar to PATH you say to the adult "who loves Charlie? Who do you know who loves Charlie? And that can be really hard for them to answer because they are so focussed on how well they are doing academically that then to think about is he loved, how well is he	<i>EHCs</i>	
236	loved is quite a .. So I enjoy doing that. I need to do more of it now I am talking about it.		School values and ethos
238	I: That sounds really exciting. I might attempt to try that.	<i>School buy in</i>	
240	R: I've got the book upstairs.	<i>Job enjoyment</i>	
242	I: OK thank you. Circle of Adults... That's good. Actually I've got to do an intervention for one of my placement activities and I don't get much of a chance to do that because we've got lots of EHC's and things so trying to get that done.	<i>Systemic work of EP</i>	
244	R: I would happily do it with you so if you find a case. What you probably need and I know we are going off tangent a bit but what you need is a school where you know you are going to get quite a lot of buy in and it takes about an hour to	<i>Training with a primary mental health worker</i> <i>Self-harm training</i> <i>Anxiety training</i>	

246	hour and a half so probably a staff meeting kind of thing so have a think about it. I'd love to do it with you and I will give you the book upstairs.	<i>Circle of Adults</i>	EPs working with other professionals
248	I: OK Exciting. So we've covered some of this. So is there any other sort of systemic stuff? So you've talked about training before and training staff and	<i>Work discussion groups</i> <i>Wellbeing of CYP in special school</i>	EPs working at school level
250	you've done some individual work with a child and then going on to training.	<i>Wellbeing of staff</i>	
252	R: Yes and I've done some training with a primary mental health worker on self-harm. Not training as such but awareness of self-harm particularly. Um...	<i>Good impact</i>	EPs use of wellbeing interventions (staff)
254	obviously anxiety training. Yes most of the systems work is probably training or the Circle of Adults type work. Erm... (pause) and also a previous colleague		
256	and I worked with a special school and we did some work discussion groups and that was really focussed around the... well it started off being focussed on the emotional wellbeing of the students in a special school but it evolved within	<i>Difficult for staff to talk about their own wellbeing</i>	
258	six sessions that it was actually about their mental health and we used a lot of vocabulary about the young people that then kind of moved on to being about	<i>Relationship with EP</i>	
260	them. That was a really powerful piece of work actually.	<i>Staff supporting each other</i> <i>Difficult for staff to talk about their own wellbeing</i>	Staff wellbeing
262	I: That's lovely because actually that's one of the things I'm actually really interested in to see if thinking about wellbeing in school as a whole and actually the kind of lack of focus on staff's own wellbeing is ...		
264	R: Yes it's really hard for them to even talk about it and even being in a special school and this was for children with learning difficulties that focus was there	<i>Peer supervision</i> <i>Building capacity</i>	
266	for the children but was not for them. After a while they had that relationship with us where they would start to talk about how they'd support each other and		

268	what they recognise about each other but it was really hard for them which is quite sad really.		EPs use of wellbeing interventions (staff)
270	I: It is really, and the amount of pressure they are under timewise and the lack of supervision and time.	<i>Daily EP focus on staff wellbeing</i>	
272	R: And in a way it evolved as supervision like peer supervision and when we left they carried on with it.	<i>Wellbeing check</i>	
274	I: That's brilliant. That's fantastic.	<i>Rich picture of staff support themselves</i>	
	R: I'm sure they're not doing it now any more but yes it was...	<i>EPs could do a lot more wellbeing work</i>	EP use of wellbeing interventions (staff)
276	I: Can you think of any other examples like that where either yourself or some other EPs have focussed on the wellbeing of staff in schools?	<i>Caution around offering wellbeing work in schools</i>	
278	R: I think I'd like to think that the team currently do a lot of that so it might be through their day to day visits to the schools, with their phone calls a kind of	<i>Schools knowledge of EP role.</i>	Staking a claim
280	wellbeing check but also I know one of the team for example looked at building a rich picture around staff supporting themselves which was at one of our	<i>Balance of being needs led & promoting scope of EP role.</i>	
282	ESCs.		
	I: That sounds good.	<i>Consultation model promoting more discussion around MH.</i>	
284	R: Yes. I'm not sure. I think there's a lot more we could be doing but I think what we need to be careful of is saying this is what we can do and then offering	<i>Shift historic view of EPs doing individual work</i>	
286	it rather than finding the balance between this is what we can do, what do you need? It needs to be both ways because until the schools know that we can	<i>Good impact</i>	Challenges to EPs working in the field of MH & wellbeing
288	offer something around mental health.		
290			

292	I: I suppose it is that very careful balance of being needs led but then also promoting what the scope of our role can be within the schools. Yes it's a very careful balance especially with workload and things like that.	<i>Traditional role of EP Impact</i>	Perception of EP role by other professionals
294	R: Yes it is but I think with the consultation model as it stands I feel we are probably getting more discussion around mental health because maybe the historic view of psychologists coming in and doing that individual work has shifted because of the model so therefore we're getting really to the nitty gritty cases where we can actually talk about things and make a difference.	<i>Schools view of the EP role.</i>	
296	I: That's really interesting that you say that because it is one of the things I put in my introduction about I suppose the move in educational psychology, the shift to working more in a consultative way and less discreet coming in. As you said going in and doing a piece of work, coming away, writing a report and then not really having much of an impact.	<i>Psychology is best in consultation model Working with adults around CYP</i>	Perception of EP role by other professionals
300	R: And it's how the school see that because I wonder whether schools might see that we could be more effective in terms of emotional wellbeing if we're working directly with a child but actually I would argue that the psychology is probably the best in the consultation model because then you are working with the adults who are dealing with the problems on a day to day basis with those issues. That is just my view.	<i>EP capacity EP workload Managing barriers</i>	
302	I: That's really interesting thank you. I think just a few more questions. How are we doing for time?	<i>Can't do everything for everyone</i>	Challenges to EPs working the field of MH & wellbeing
304	R: I think we're doing fine.	<i>Lots of teams and service Lack of clarity for schools EP role in MH Government agenda</i>	
306		<i>Barrier</i>	Need for clarity

312	I: OK. Are there any barriers do you think for EPs offering wellbeing work in schools?		
314	R: I think there are. We have to be realistic. I think some of the barriers are around capacity, workload, time but those barriers have always been there, will		Government impact
316	always be there that I think it's about how we manage those. I don't think they are barriers that should stop us doing that but we have to be realistic and we	<i>Uncertainty</i>	
318	can't do everything for everyone. I think there were two more barriers actually. One is around perhaps the lack of clarity between services. There are so many	<i>Perception that EPs don't do MH work</i>	
320	teams and services out there and I'm thinking kind of [REDACTED] specific probably where perhaps there isn't clarity for schools and each other about		
322	where our role is in mental health and it is so high in terms of government agenda that everybody is promoting but actually what does this service do and	<i>Shift in EP profession</i>	
324	how can we work together? I think that is probably a barrier. It's a bit messy that's fair to say. (laugh)	<i>Opening up to wellbeing side of EP role</i>	Perception of EP role by other professionals
326	I: That's a really good way of putting it and actually that's come up in a lot of the stuff I have been reading in the literature search about sort of plugging		
328	those gaps and about who does what.	<i>Nurture Group</i>	Perception of EP role within the profession
340	R: And I don't think necessarily we know. We don't know. I'd like to think we know we are getting there but I don't think we know yet and the other barrier is the perception of our role which kind of ties into that. The perception that	<i>Nurture group training</i>	
342	perhaps we don't do that kind of work.		
344	I: Yes that definitely came about in my first interview with the SENCo. (chuckle)		EPs working at school level

346	R: But do you know what I think is really interesting about the profession I think that is really shifting. I think over the last probably five or six years I've seen it myself where there's that real shift in kind of opening what we do up to the	<i>Good impact</i>	
348	emotional health and wellbeing bit and the other bits all tie in but really having that underpinning. Well I've seen that anyway.		
350	I: Ok that's interesting and it's good to know that from someone who has been in the profession for quite a long time.		
352	R: If you think about the nurture group focus. We did a bit on nurture group training and everything about nurture is about looking after yourselves and then	<i>Individual perceptions of EP role</i>	
354	you can look after the children. All of that is such a big plug at the moment and I think is really relevant actually.	<i>Shift in EP profession</i>	
356	I: I suppose that's another example of well that fits in to kind of all levels doesn't it because nurture group works on a kind of individual basis but it also	<i>Training route of EPs</i>	Perception of EP role within the profession
358	works on a more universal level.		
360	R: And I think schools where they've got the nurture provision right you do see the impact of that on the teachers and staff definitely.	<i>Therapeutic and systemic focus at university</i>	
362	I: Erm... (pause) and how do you think the EP work could develop further in the future?		EP training route
	R: Erm...		
364	I: I suppose part of your project would fit quite well with that.		
366	R: I suppose linking up with CAMHS project. The EP role specifically? I always think we as EPs are also individuals and we all do work slightly differently so I think one EP may well want to develop the role to be more about	<i>Reality shift from training to LA EP work</i>	

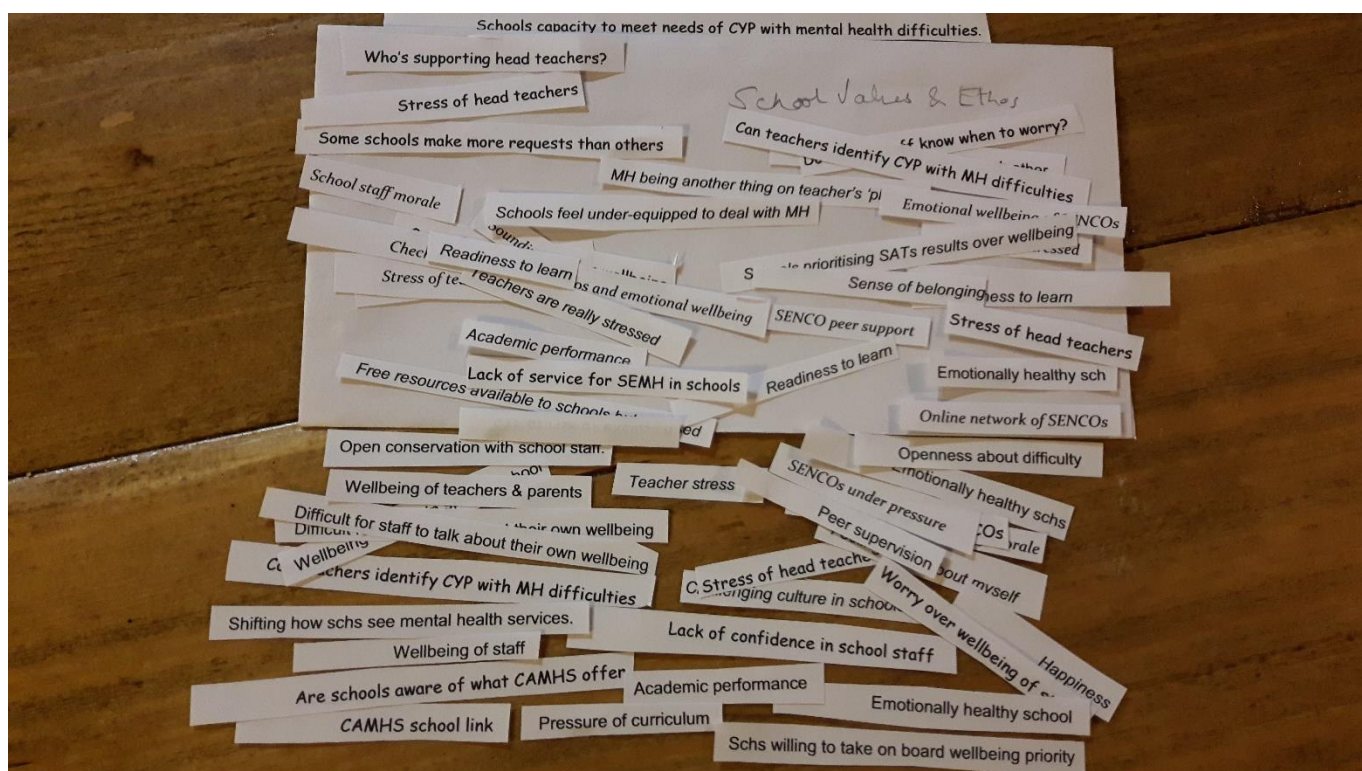
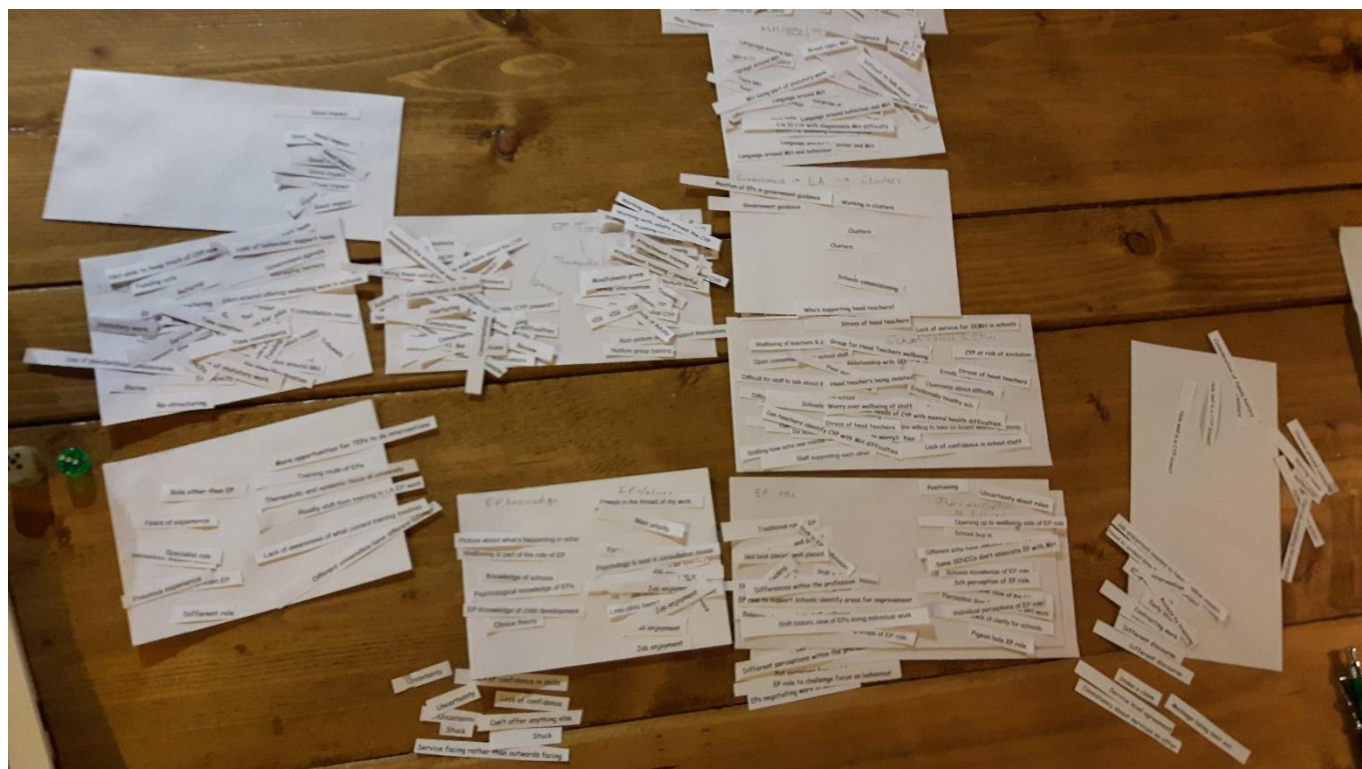
368	mental health but another EP may not and I think we have to be respectful and	<i>Need to protect time for long term project</i>	
370	mindful of that but I think as a profession I think it's happening quite naturally	<i>Job enjoyment</i>	
372	and obviously I don't know as well as you will do in terms of the training and the focus from the university's point of view but I assume that is much more of a priority now.	<i>Job enjoyment needed to have positive impact.</i>	Challenges to EPs working in the field of MH & wellbeing
374	I: Yes it is and I think being a trainee now and talking to my colleagues at university some of them have found it really difficult going from having that really intense input at university and to a lot of it being around therapeutic work or even more systemic work and then actually going into the field. I think a lot of people have found it quite difficult and frustrating. Because I was an assistant EP before I was kind of aware of the constraints of the work and other things like that whereas others that weren't aware of it found that quite difficult so I think maybe part of that natural progression could have been to do with the change in the route.		Retention of EPs
376			
378	R: Yes I think it could be and I think also I know there is a reality shift when you are working and things become more difficult in the sense of both doing more longer term projects if you like but I do still think there is a place for them and I think we need to be really careful to protect that time. Not only for the impact on the young people and the schools but for us as professionals so we still enjoy what we do and that we actually feel a sense of value because if we don't do that, we can't do it for anyone else and I feel quite strongly about that actually.	<i>Assessing the emotional wellbeing or school of individual CYP</i> <i>Use of standardised assessments</i> <i>Being aware of the resources available</i>	
382			
384			
386			
388		<i>Richer tools</i>	Clarity about EP activities on offer
390			

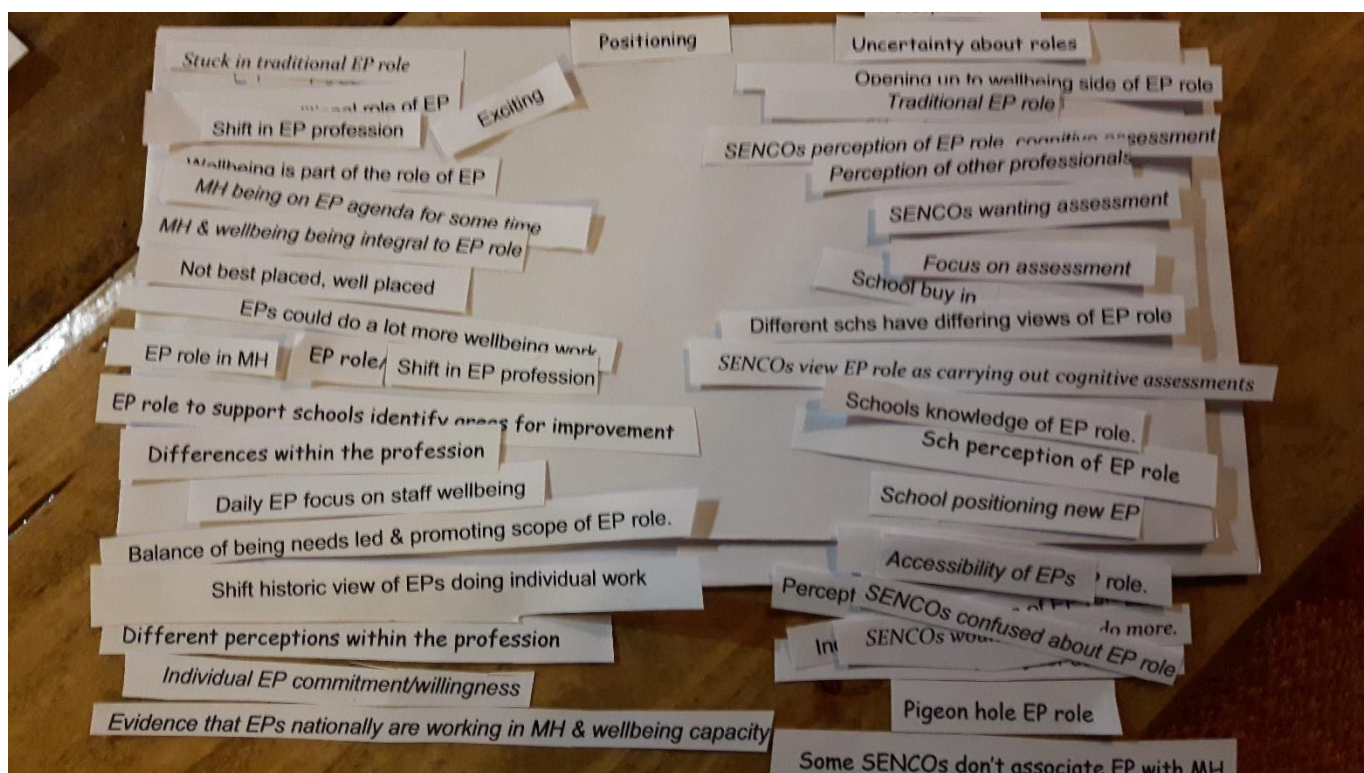
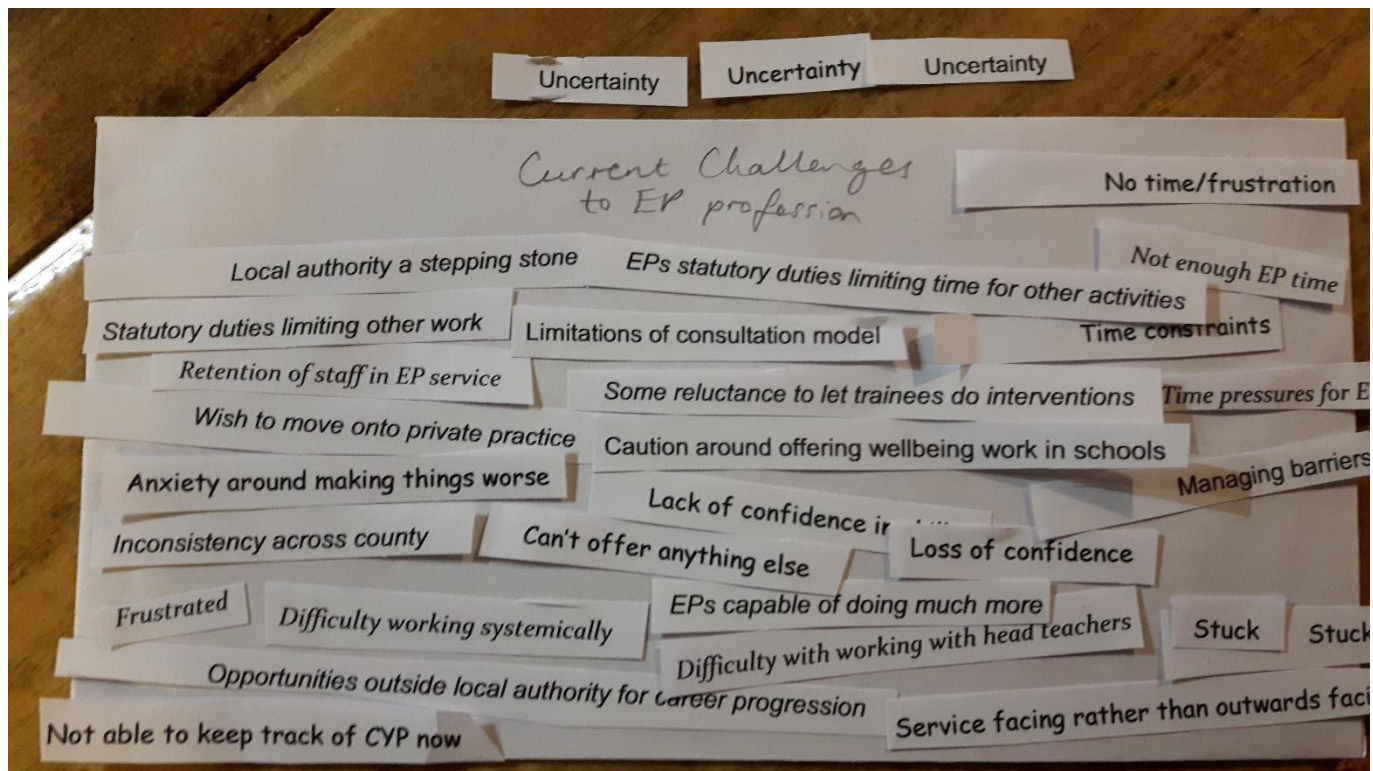
392	I: That's really important and it's nice to hear as well that you still feel like that after all those years.		
	R: Probably more so to be honest.		
394	I: That's good. Erm... and what trainings and skills do you think EPs need to deliver the wellbeing agenda?		
396	R: (pause) skills and resources? (longer pause) I suppose it's not so much about the skills its more about understanding, so understanding how to		
398	ascertain the emotional wellbeing of a school and a young person so whether people use standardised assessments or whether people use observational.		EP training route and CPD
400	Again I think that's an individual choice but I think there is a lot more out there. Perhaps it is an awareness of what resources we have. Even if I think about		
402	██████████ we've got quite a lot of assessment tools that perhaps aren't used massively and perhaps moving away from smarter tools like SDQ for example	<i>Lack of awareness of what current training involves</i>	
404	and perhaps using richer tools and getting away from emotional health rather than checklist focus.		
406	I: And anything about training as well?		
	R: I don't know if I feel able to say that because I don't know what you have		
408	already.		
	I: Yes I think the universities are different as well. Some people might have a		
410	distinct focus on CBT and do a piece of work and have training at the university whereas we at UEL focus more on CBT approaches so I think sometimes I'm	<i>Shouldn't matter if we say CBT or CBT approaches</i>	
412	trying to think of the right word, some defensiveness about whether or not we can say we use CBT or whether we say we use CBT approaches because we		EPs use of wellbeing interventions
		<i>Clinical model of MH</i>	

414	haven't officially had the whole, I think it's a year, training so I think there are	<i>Fear of MH</i> <i>Emotional wellbeing</i> <i>broader/language</i>	Differing constructs of MH
416	some of those issues. I can feel that at the university because there is always a little bit of do we, don't we?		
418	R: That's funny isn't it because I would say it doesn't really matter as long as we are using an approach that works whether we call it CBT or CBT	<i>Different perspectives of MH</i> <i>Marrying the gap;</i> <i>perspectives of MH</i>	Fear of working in the field of MH
420	approaches I don't think for the young person it matters. It probably matters more to us as a profession how we are saying it but I don't think it should matter		
422	I: I think that comes a little bit from what you are saying about the clinic side of things; the medical model where people feel that it has to be hugely robust		
424	evidence base and you have to follow it to the book and it has to be manualised and that sort of thing when actually I think it is more about what is		
426	helpful for that young person and if you can use a few different approaches and it works well and they get something out of it then surely that's going to be more beneficial.		Perception of the EP role
428	R: I think you are exactly right, Rachael. When you think about mental health, you could immediately think about that sort of clinical model and that could be		
430	quite scary, can't it? And you could think that's not something I am delving into but if you see it as emotional wellbeing then it becomes much broader I would		
432	say.		
434	I: Lovely OK I've added these questions on at the end because on the research I wanted to make it cooperative so that it actually in a way is not just about me wanting to find out and explore things, it's about maybe taking it forward and		Need for clarity around EP activities

436	using it and making it useful; so what would you like to see happen as a result of the research.	<i>Linking with CAMHS</i>	
438	R: I would like to see more.. of your particular piece of research? (pause). I suppose it's around sharing about what everyone's talked about, so looking at	<i>Sharing information</i>	
440	the different perspectives would be useful and perhaps marrying that gap, potentially there may not be one, marrying that potential gap between school's		
442	perception and other professions' perception of mental health and also the professions who work within that realm. I think I would like to see. So not too		
444	big for you though (laugh). I: No that's really good because that's something I was interested in doing because the title of it is about coming to a shared understanding and being able to kind of think about other people's views and I suppose the process of research is going to try to open people's perceptions of what different ideas are about it. So yes hopefully but one of the things I was thinking about is who would I share it with so initially it would be our working party; people who have been taking part but then I would like to consider about other places I can share it and your project would be a really good place. R: The CAMHS project would be a really good place to share that and obviously sharing that with the service once you've completed it, sharing your findings would be good. I: I think that's it. Perfect. I hope it's worked. Yes it has so that's perfect.		EPs working with other professionals

Appendix J: Photographic evidence of stage 3 of TA





[illegible]

School of Psychology Research Ethics Committee

NOTICE OF ETHICS REVIEW DECISION

For research involving human participants

BSc/MSc/Professional Doctorates in Clinical, Counselling and Educational Psychology

REVIEWER: Mark Holloway

SUPERVISOR: Tina Rae

COURSE: Professional Doctorate in Educational and Child Psychology

STUDENT: Rachael Andrews

TITLE OF PROPOSED STUDY: Reaching for a Shared Understanding: Exploring the views of Educational Psychologists (EPs) and Special Educational Needs Coordinators (SENCOs) about the role of the EP in supporting mental health and psychological well-being in schools.

DECISION OPTIONS:

1. **APPROVED:** Ethics approval for the above named research study has been granted from the date of approval (see end of this notice) to the date it is submitted for assessment/examination.
2. **APPROVED, BUT MINOR AMENDMENTS ARE REQUIRED BEFORE THE RESEARCH COMMENCES** (see Minor Amendments box below): In this circumstance, re-submission of an ethics application is not required but the student must confirm with their supervisor that all minor amendments have been made before the research commences. Students are to do this by filling in the confirmation box below when all amendments have been attended to and emailing a copy of this decision notice to her/his supervisor for their records. The supervisor will then forward the student's confirmation to the School for its records.
3. **NOT APPROVED, MAJOR AMENDMENTS AND RE-SUBMISSION REQUIRED** (see Major Amendments box below): In this circumstance, a revised ethics application must be submitted and approved before any research takes place. The revised application will be reviewed by the same reviewer. If in doubt, students should ask their supervisor for support in revising their ethics application.

DECISION ON THE ABOVE-NAMED PROPOSED RESEARCH STUDY

(Please indicate the decision according to one of the 3 options above)

Approved

Minor amendments required *(for reviewer):*

Major amendments required *(for reviewer):*

ASSESSMENT OF RISK TO RESEACHER *(for reviewer)*

If the proposed research could expose the researcher to any of kind of emotional, physical or health and safety hazard? Please rate the degree of risk:

☐

HIGH

☐

MEDIUM

☐

LOW

Reviewer comments in relation to researcher risk (if any):

Reviewer *(Typed name to act as signature):* Mark Holloway

Date: 4th March 2016

This reviewer has assessed the ethics application for the named research study on behalf of the School of Psychology Research Ethics Committee

Confirmation of making the above minor amendments *(for students):*

I have noted and made all the required minor amendments, as stated above, before starting my research and collecting data.

Student's name

Student number:

Date:

(Please submit a copy of this decision letter to your supervisor with this box completed, if minor amendments to your ethics application are required)

PLEASE NOTE:

*For the researcher and participants involved in the above named study to be covered by UEL's insurance and indemnity policy, prior ethics approval from the School of Psychology (acting on behalf of the UEL Research Ethics Committee), and confirmation from students where minor amendments were required, must be obtained before any research takes place.

*For the researcher and participants involved in the above named study to be covered by UEL's insurance and indemnity policy, travel approval from UEL (not the School of Psychology) must be gained if a researcher intends to travel overseas to collect data, even if this involves the researcher travelling to his/her home country to conduct the research. Application details can be found here: <http://www.uel.ac.uk/gradschool/ethics/fieldwork/>